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| Fill in this information to identify your case: |  |                                      |
|---|--|--------------------------------------|
| United States Bankruptcy Court for the :        |  |                                      |
| NORTHERN District ofILLINOIS(State)             |  |                                      |
| Case Number (If known):                         | Chapter you are filing under:  Chapter 7  Chapter 11  Chapter 12  Chapter 13 | ☐ Check if this is an amended filing |

## **Official Form 101**

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself   |                            |   |
|----|---|----------------------------|---|
|    |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name  |                            |   |
|    | Write the name that is on your government-issued picture identification (for example, | Claudia First name         | First name                                    |
|    | your driver's license or passport).   | Middle name                | Middle name                                   |
|    |   | Hinestrosa                 |   |
|    | Bring your picture identification to your meeting with the trustee.                   | Last name                  | Last name                                     |
|    |   | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you   |                            |   |
|    | have used in the last 8   | First name                 | First name                                    |
|    | years   |                            |   |
|    | Include your married or maiden names.   | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
|    |   | First name                 | First name                                    |
|    |   | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
| 3. | Only the last 4 digits of your Social Security  | XXX - XX - <u>2540</u>     | xxx - xx                                      |
|    | number or federal<br>Individual Taxpayer  | OR                         | OR  |
|    | Identification number   | <b>9</b> xx - xx           | <b>9</b> xx - xx                              |

Case 18-10424 Doc 1 Filed 04/10/18 Entered 04/10/18 14:01:54 Desc Main Page 2 of 62 Document Claudia Hinestrosa Case Number (if known) Debtor 1 Middle Name **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): Any business names I have not used any business names or EINs. and Employer I have not used any business names or EINs. **Identification Numbers** (EIN) you have used in Business name Business name the last 8 years Include trade names and Business name Business name doing business as names EIN EIN Where you live If Debtor 2 lives at a different address: 669 S. Rosehall Lane Number Street Number Street Round Lake IL 60073 City State ZIP Code City ZIP Code **LAKE** County County If Debtor 2's mailing address is different from If your mailing address is different from the one above, fill it in here. Note that the court will send the one above, fill it in here. Note that the court any notices to you at this mailing address. will send any notices this mailing address. Number Number Street Street P.O. Box P.O. Box City State ZIP Code City State ZIP Code Check one: Check one: Why you are choosing this district to file for Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, bankruptcy. l have lived in this district longer than in any I have lived in this district longer than in any

other district.

| _ | have another reason<br>(See 28 U.S.C. § 1408 | . Explain. |  |
|---|--|------------|--|
|   |  |            |  |
|   |  |            |  |

other district.

| (See 2 | 8 U.S.C. | § 1408 |      |  |
|--------|----------|--------|------|--|
|        |          |        |      |  |
|        |          |        | <br> |  |
|        |          |        | <br> |  |

I have another reason. Explain.

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Case Number (if known)

| Part 2: Tell the Court About                          | той ванктиресу         | Vast   |   |  |                                       |  |  |
|---|------------------------|--|---|--|---------------------------------------|--|--|
| The chapter of the Bankruptcy Code you                |                        | •  |   | Required by 11 U.S.C. § 342(b) for It page 1 and check the appropriate It  |                                       |  |  |
| are choosing to file<br>under                         | ☐ Chap                 | ☐ Chapter 7  |   |  |                                       |  |  |
| under   | ☐ Chap                 | ☐ Chapter 11   |   |  |                                       |  |  |
|   | ☐ Chap                 | ☐ Chapter 12   |   |  |                                       |  |  |
|   | ■ Chap                 | oter 13  |   |  |                                       |  |  |
| . How you will pay the fee                            | local<br>your<br>subn  | court for more details self, you may pay with                                  | about how you may<br>cash, cashier's che<br>n your behalf, your a | . Please check with the clerk's of pay. Typically, if you are payin ck, or money order. If your attorated may pay with a credit of   | g the fee<br>ney is                   |  |  |
|   | ☐ I nee                | ed to pay the fee in ins   | stallments. If you ch   | oose this option, sign and attac   | h the                                 |  |  |
|   | Appl                   | ication for Individuals t  | to Pay The Filing Fe  | e in Installments (Official Form   | 103A).                                |  |  |
|   | By la<br>less<br>pay t | aw, a judge may, but is<br>than 150% of the offici<br>the fee in installments) | not required to, waiting poverty line that a lift you choose this | est this option only if you are fil ve your fee, and may do so onl applies to your family size and yoption, you must fill out the <i>App</i> BB) and file it with your petition. | y if your income is you are unable to |  |  |
| . Have you filed for                                  | □ No                   |  |   |  |                                       |  |  |
| bankruptcy within the                                 | <b>-</b> v             | NDII   |   | 03/10/2014 <sub>Case Number</sub>  | 14-08297                              |  |  |
| last 8 years?   | Yes.                   | District NDIL  | When  | MM / DD / YYYY   | 11 00201                              |  |  |
|   |                        | District None  |   |  |                                       |  |  |
|   |                        | District   | When  | Case Number<br>MM / DD / YYYY  |                                       |  |  |
|   |                        | B  |   |  |                                       |  |  |
|   |                        | District   | When  | Case Number<br>MM / DD / YYYY  |                                       |  |  |
| ). Are any bankruptcy                                 | ■ No                   |  |   |  |                                       |  |  |
| cases pending or being                                | _                      |  |   |  |                                       |  |  |
| filed by a spouse who is<br>not filing this case with | ☐ Yes.                 | Debtor<br>District   |   | Relationship to you _ Case Number, if kn   |                                       |  |  |
| you, or by a business<br>parter, or by<br>affiliate?  |                        |  |   | MM / DD / YYYY   |                                       |  |  |
|   |                        | Debtor   |   | Relationship to you _  |                                       |  |  |
|   |                        | District   | When  | Case Number, if kn   | own                                   |  |  |
|   |                        |  |   | MM / DD / YYYY   |                                       |  |  |
| Do you rent your residence?                           | □ No.<br>■ Yes.        | Go to line 12<br>Has your landlord obtai                                       | ined an eviction judgme   | ent against you?   |                                       |  |  |
|   |                        | ■ No. Go to line 12. □ Yes. Fill out <i>Initia</i> this bankruptcy p           | l Statement About an E  | Eviction Judgment Against You (Fo  | rm 101A) and file it with             |  |  |

Claudia

Debtor 1

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Document Hinestrosa Claudia

Debtor 1

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| Debto | or 1                             | Claudia   |                           | Hinestr  | osa   | Case Number (if kn         | 10wn)         |                 |   |
|-------|----------------------------------|---|---------------------------|--|---|----------------------------|---------------|-----------------|---|
|       |                                  | First Name  | Middle Name               | Last Name  |   |                            | ,             |                 |   |
|       |                                  |   |                           |  |   |                            |               |                 |   |
| Pa    | rt 3:                            | Report About Any Busin  | esses You Ow              | n as a Sole Proprietor   |   |                            |               |                 |   |
|       |                                  |   | _                         |  |   |                            |               |                 |   |
| 12.   |                                  | you a sole proprietor   | No.                       | Go to Part 4.  |   |                            |               |                 |   |
|       |                                  | any full- or part-time  | Yes.                      | Name and location of b   | ousiness  |                            |               |                 |   |
|       |                                  | siness?   |                           |  |   |                            |               |                 |   |
|       |                                  | ole proprietorship is a iness you operate as an   |                           |  |   |                            |               |                 |   |
|       |                                  | vidual, and is not a  |                           | Name of business, if any   |   |                            |               |                 |   |
|       |                                  | arate legal entity such as  |                           |  |   |                            |               |                 |   |
|       |                                  | orporation, partnerhsip, or   |                           | No mark and Other at   |   |                            |               |                 |   |
|       | LLC<br>If vo                     | ;.<br>ou have more than one   |                           | Number Street  |   |                            |               |                 |   |
|       |                                  | e proprietorship, use a   |                           |  |   |                            |               |                 |   |
|       |                                  | arate sheed and attach it   |                           |  |   |                            |               |                 |   |
|       | to th                            | nis petition.   |                           |  |   |                            |               |                 |   |
|       |                                  |   |                           | City   |   |                            | State         | Zip Code        |   |
|       |                                  |   |                           |  |   |                            |               |                 |   |
|       |                                  |   |                           | Check the appropriate  | box to describe your b  | ousiness:                  |               |                 |   |
|       |                                  |   |                           | ☐ Health Care Busi   | iness (as defined in 11                                       | U.S.C. § 101(27A))         |               |                 |   |
|       |                                  |   |                           | □ Single Asset Rea   | al Estate (as defined in                                      | 11 U.S.C. § 101(51B))      |               |                 |   |
|       |                                  |   |                           | _ `  | ,   |                            |               |                 |   |
|       |                                  |   |                           | ☐ Stockbroker (as o  | defined in 11 U.S.C. §  | 101(53A))                  |               |                 |   |
|       |                                  |   |                           | ☐ Commodity Broke  | er (as defined in 11 U.S                                      | S.C. § 101(6))             |               |                 |   |
|       |                                  |   |                           | ■ None of the above  | /e  |                            |               |                 |   |
|       |                                  |   |                           |  |   |                            |               |                 |   |
|       | Bar<br>are<br>deb<br>For<br>busi | apter 11 of the nkruptcy Code and you a small business otor? a definition of small iness debtor, see J.S.C. § 101(51D). | balance s document  No. I | heet, statement of opera<br>is do not exist, follow the<br>am not filing under Chap<br>am filing under Chapter<br>the Bankruptcy Code. | ations, cash-flow statem<br>procedure in 11 U.S.C<br>pter 11. | nall business debtor accor | tax return or | if any of these |   |
|       |                                  |   | ∐ Yes.                    | l am filing under Chapter<br>Bankruptcy Code.  | · 11 and I am a small b                                       | usiness debtor according   | to the defin  | ition in the    |   |
|       |                                  |   |                           |  |   |                            |               |                 |   |
| Рa    | rt 4:                            | Report if You Own or Ha   | ave Any Hazard            | ous Property or Any Prop   | erty That Needs Immed   | Jiate Attention            |               |                 |   |
|       |                                  |   |                           |  |   |                            |               |                 |   |
| 14.   | Do                               | you own or have any   | No.                       |  |   |                            |               |                 |   |
|       | •                                | perty that poses or is  | □ Yes                     | What is the hazard?  |   |                            |               |                 |   |
|       |                                  | ged to pose a threat  | ☐ 103.                    | What is the hazara:  |   |                            |               |                 |   |
|       |                                  | mminent and<br>entifiable hazard to   |                           |  |   |                            |               |                 |   |
|       |                                  | olic health or safety?  |                           |  |   |                            |               |                 |   |
|       | -                                | do you own any  |                           |  |   |                            |               |                 |   |
|       |                                  | perty that needs  |                           |  |   |                            |               |                 |   |
|       | -                                | nediate attention?  |                           | If immediate attention is  | needed, why is it need  | ded?                       |               |                 | _ |
|       | For                              | example, do you own   |                           |  |   |                            |               |                 |   |
|       |                                  | shable goods, or livestock  |                           |  |   |                            |               |                 |   |
|       |                                  | must be fed, or a building needs urgent repairs?  |                           |  |   |                            |               |                 | _ |
|       | แเสโ                             | neeus urgent repairs?   |                           |  |   |                            |               |                 |   |
|       |                                  |   |                           | Where is the property?   |   |                            |               |                 | _ |
|       |                                  |   |                           |  | Number Street   |                            |               |                 | _ |
|       |                                  |   |                           |  |   |                            |               |                 |   |
|       |                                  |   |                           |  |   |                            |               |                 |   |
|       |                                  |   |                           |  |   |                            |               |                 |   |
|       |                                  |   |                           |  | City  |                            | State         | e ZIP Code      |   |
|       |                                  |   |                           |  | ···,  |                            | Olale         | 5000            |   |

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Debtor 1

Claudia

Name Middle N

Hinestrosa

Case Number (if known) \_

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|---|---|
| You must check one:   | You must check one:   |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  | ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  |
| □ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.   | ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.   |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| I am not required to receive a briefing about credit counseling because of:   | ☐I am not required to receive a briefing about credit counseling because of:  |
| Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  |
| Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I   | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I   |

reasonably tried to do so.

duty in a military combat zone.

Active duty. I am currently on active military

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

reasonably tried to do so.

duty in a military combat zone.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

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| De | htor | 1 |
|----|------|---|

Claudia

Case Number (if known)

|           |  | 16a. Are your debts primarily  | consumer debts? Consumer debts are de   | fined in 11 U.S.C. § 101(8)                            |  |  |
|-----------|--|--|---|--|--|--|
| 6.        | What kind of debts do vou have?                        | as "incurred by an individual primarily for a personal, family, or household purpose." |   |  |  |  |
| you nave: |  | No. Go to line 16b. Yes. Go to line 17.  |   |  |  |  |
|           |  |  | <b>business debts?</b> Business debts are debts strengther through the operation of the busine              |  |  |  |
|           |  | No. Go to line 16c. Yes. Go to line 17.  |   |  |  |  |
|           |  | _  | we that are not consumer debts or business of   | debts.   |  |  |
|           |  |  |   |  |  |  |
| 7.        | Are you filing under Chapter 7?                        | No. I am not filing under Ch   | napter 7. Go to line 18.  |  |  |  |
|           | Do you estimate that after                             |  | er 7. Do you estimate that after any exempt ps are paid that funds will be available to distril             |  |  |  |
|           | any exempt property is                                 | □No.   | o aro para arat rando min do aranazio to aroan  |  |  |  |
|           | excluded and<br>administrative expenses                | □Yes.  |   |  |  |  |
|           | are paid that funds will be available for distribution | □1 es.   |   |  |  |  |
|           | to unsecured creditors?                                |  |   |  |  |  |
| 8.        | How many creditors do                                  | 1-49   | 1,000-5,000   | 25,001-50,000  |  |  |
|           | you estimate that you owe?                             | ☐ 50-99<br>☐ 100-199   | ☐ 5,001-10,000<br>☐ 10,001-35,000   | ☐ 50,001-100,000<br>☐ More than 100,000                |  |  |
|           |  | 200-999  | ☐ 10,001-25,000   | More than 100,000                                      |  |  |
| 9.        | How much do you  | \$0-\$50,000   | \$1,000,001-\$10 million  | □\$500,000,001-\$1 billion                             |  |  |
|           | estimate your assets to                                | \$50,001-\$100,000   | \$10,000,001-\$50 million   | \$1,000,000,001-\$10 billion                           |  |  |
|           | be worth?  | ☐ \$100,001-\$500,000<br>☐ \$500,001-\$1 million                                       | ☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million  | ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion |  |  |
| .0.       | How much do you  | \$0-\$50,000   | □ \$1,000,001-\$10 million  | □\$500,000,001-\$1 billion                             |  |  |
|           | estimate your liabilities                              | \$50,001-\$100,000   | \$10,000,001-\$50 million   | □\$1,000,000,001-\$10 billion                          |  |  |
|           | to be?   | <b>\$100,001-\$500,000</b>   | □ \$50,000,001-\$100 million  | □\$10,000,000,001-\$50 billion                         |  |  |
|           |  | □ \$500,001-\$1 million  | □ \$100,000,001-\$500 million   | ☐ More than \$50 billion                               |  |  |
| Pa        | rt 7: Sign Below                                       |  |   |  |  |  |
| or        | you  | I have examined this petition, and correct.  | I declare under penalty of perjury that the info  | rmation provided is true and                           |  |  |
|           |  |  | ter 7, I am aware that I may proceed, if eligibl<br>nderstand the relief available under each chap          |  |  |  |
|           |  |  | did not pay or agree to pay someone who is rd read the notice required by 11 U.S.C. § 342                   |  |  |  |
|           |  | I request relief in accordance with  | the chapter of title 11, United States Code, sp   | pecified in this petition.                             |  |  |
|           |  | 9  | nent, concealing property, or obtaining money<br>in fines up to \$250,000, or imprisonment for u<br>d 3571. |  |  |  |
|           |  | ✗ /s/ Claudia Hinestros  | a <b>X</b>  |  |  |  |
|           |  | Signature of Debtor 1  | Signa   | ture of Debtor 2                                       |  |  |
|           |  | Executed on04/04/2018  | }<br>F <sub>YPC</sub> 1   | uted on  |  |  |
|           |  | MM / DD  |   | MM / DD / YYYY   |  |  |

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Debtor 1 Claudia Hinestrosa Case Number (if known) \_\_\_\_\_\_

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Scott Justin Greenwood     | Date        | Date: 04/05/2     | 018             |
|----------------------------------|-------------|-------------------|-----------------|
| Signature of Attorney for Debtor | Bute        | MM / DD / YYYY    | ,               |
| Scott Justin Greenwood           |             |                   |                 |
| Printed name                     |             |                   | _               |
| Geraci Law L.L.C.                |             |                   | _               |
| Firm name                        |             |                   | =               |
| EE E Marrier Ot #0400            |             |                   |                 |
| 55 E. Monroe St., #3400          |             |                   | -               |
|                                  |             |                   | -               |
|                                  | IL          | 60603             | -               |
| Number Street                    | IL<br>State | 60603<br>ZIP Code | -               |
| Number Street Chicago            | State       |                   | -<br>acilaw.com |
| Number Street  Chicago  City     | State       | ZIP Code          | -<br>acilaw.com |

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| Fill in this information to identify your case: |  |   |  |  |
|---|--|---|--|--|
| Claudia   |  | Hinestrosa  |  |  |
| First Name                                      | Middle Name  | Last Name   |  |  |
|   |  |   |  |  |
| First Name                                      | Middle Name  | Last Name   |  |  |
| Bankruptcy Court for                            | the : <u>NORTHERN</u> District of                  | ILLINOIS (State)  |  |  |
| r   |  |   |  |  |
|   | Claudia First Name First Name Bankruptcy Court for | Claudia  First Name Middle Name  First Name Middle Name  Bankruptcy Court for the : <u>NORTHERN</u> District of |  |  |

# Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1:  | Summarize Your Assets   |                                      |
|----------|---|--------------------------------------|
|          |   | Your assets<br>Value of what you own |
|          | le A/B: Property (Official Form 106A/B) y line 55, Total real estate, from Schedule A/B   | <u> </u>                             |
| 1b. Copy | y line 62, Total personal property, from Schedule A/B   | \$ 9,400                             |
| 1с. Сору | y line 63, Total of all property on Schedule A/B  | \$ 9,400                             |
| Part 2:  | Summarize Your Liabilities  |                                      |
|          |   | Your liabilities<br>Amount you owe   |
|          | e D: Creditors Who Have Claims Secured by Property (Official Form 106D) y the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$5,779                              |
|          | e E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) y the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$0                                  |
| 3b. Сору | y the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | <u>\$10,951</u>                      |
|          |   |                                      |
| Part 3:  | Summarize Your Liabilities  |                                      |
|          | e I: Your Income (Official Form 106I) our combined monthly income from line 12 of Schedule I  | \$2,866.14                           |
|          | e <i>J: Your Expenses</i> (Official Form 106J) our monthly expenses from line 22c of <i>Schedule J</i>  | \$2,662.00                           |

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Case Number (if known) Document Hinestrosa

Claudia Debtor 1

First Name Middle Name Last Name

| Part 4:         | Answer These Questions for Administrative and Statistical Records  |              |  |  |  |  |  |  |
|-----------------|--|--------------|--|--|--|--|--|--|
| _               | 6. Are you filing for bankruptcy under Chapter 7, 11 or 13?  |              |  |  |  |  |  |  |
| Yes             | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes  |              |  |  |  |  |  |  |
| _               | What kind of debt do you have?  Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal,"  |              |  |  |  |  |  |  |
| Your            | family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. |              |  |  |  |  |  |  |
|                 | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.  \$ 3,363.62  |              |  |  |  |  |  |  |
| 9. Copy the     | e following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :  | Total claim  |  |  |  |  |  |  |
| From P          | Part 4 of Schedule E/F, copy the following:  | Total olalli |  |  |  |  |  |  |
| 9a. Dom         | estic support obligations (Copy line 6a.)  | \$_ 0.00     |  |  |  |  |  |  |
| 9b. Taxe        | es and certain other debts you owe the government. (Copy line 6b.)   | \$_0.00      |  |  |  |  |  |  |
| 9c. Clain       | ns for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$_0.00      |  |  |  |  |  |  |
| 9d. Stud        | ent loans. (Copy line 6f.)   | \$_0.00      |  |  |  |  |  |  |
|                 | gations arising out of a separation agreement or divorce that you did not report as<br>claims. (Copy line 6g.)   | \$_0.00      |  |  |  |  |  |  |
| 9f. Debt        | s to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | \$_0.00      |  |  |  |  |  |  |
| 9g. <b>Tota</b> | I. Add lines 9a through 9f.  | \$_0.00      |  |  |  |  |  |  |

|  | Caso 19   | 2 10424 Doc 1  | Eilad 04/10/19   | Entered 04/10/18 1   | 4·01·54 D   | esc Main                                       | 1                  |
|--|---|--|--|--|---|--|--------------------|
| Fill in this in  | formation to ide  | ntify your case and this filir   |  | 0 of 62  |   | oo man   | •                  |
| Debtor 1   | Claudia   |  | Hinestrosa   |  |   |  |                    |
|  | First Name  | Middle Name  | Last Name  |  |   |  |                    |
| Debtor 2<br>(Spouse, if filing)  | First Name  | Middle Name  | Last Name  |  |   |  |                    |
| United States  | Bankruptcy Court fo   | or the : <u>NORTHERN</u> Distric   | ct of <u>ILLINOIS</u>  |  |   |  |                    |
| Case Number  |   |  | (State)  |  |   | Check i  | f this is an       |
| (If known)   |   |  |  |  |   | amende   | ed filing          |
| Official Fo  | <u>orm 106A</u>   | <u>/B</u>  |  |  |   |  |                    |
| Schedul  | e A/B: Pr   | operty   |  |  |   |  | 12/15              |
| ategory where esponsible for ages, write you on the control of the | you think it fits supplying corre ur name and cas Describe Each Reven or have any le  | best. Be as complete and a<br>ct information. If more spac<br>e number (if known). Answ<br>sidence, Building, Land, or O<br>gal or equitable interest in | accurate as possible. If two mace is needed, attach a separate er every question.  ther Real Esate You Own or Have any residence, building, land,                        | or similar property?   | both are equally  |  |                    |
|  | -   | -  | our entries fro Part 1, includin   |  | >   |  | \$0.00             |
|  | Describe Your Vel   |  |  |  |   |  | Ψ0.00              |
| Part 2:  | Jescribe Tour Ver   | licies   |  |  |   |  |                    |
| No. Yes.  No.  Yes.  No.  A  Od. Watercraft  Examples:  No.  Yes.  | Describe  flake: flodel: fear: pproximate Milea ther information: 2008 Infiniti G35 v  aircraft, motor Boats, trailers, motor | with over 120,000 miles  homes, ATVs and other recors, personal watercraft, fishing  | Who has an interest in the purpose of the debtors of the debtors.  Check if this is communinstructions)  Creational vehicles, other vehicles, snowmobiles, motorcycle as | and another  nity property (see  cles, and accessories accessories | Do not deduct secur<br>the amount of any se<br>Creditors Who Have<br>Current value of the<br>entire property?<br>\$8,30 | ecured claims on<br>Claims Secured<br>ne Curre | Schedule D:        |
|  |   |  | our entries fro Part 2, includin   | g any entries for pages  |   |  | \$ 8,300.00        |
|  |   | sonal and Household Items  |  |  |   |  |                    |
|  | have any legal  | or equitable interest in any   | of the following items?  |  |   | portion yo                                     | uct secured claims |
| Examples:  |   | nishings<br>urniture, linens, china, kitchenwa   | are  |  |   |  |                    |
| Yes.   | Describe  | Linens, small appliances, furnit   | ture   |  | \$400   |  | \$ 400.00          |

Official Form 106A/B Record # 763903 Schedule A/B: Property Page 1 of 6

Case 18-10424 Doc 1 Desc Main Claudia Debtor 1 07. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No. Yes. Describe..... TV, Cell phone \$200 200.00 08. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No. Describe..... Yes. 0.00 09. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No. Describe..... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No. Describe..... Yes. 0.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories 'es Describe..... Everyday clothes, shoes, accessories \$200 200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No. Describe..... Everyday jewelry, costume jewelry \$100 100.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No. Describe..... 0.00 14. Any other personal and household items you did not already list, including any health aids you did not list Describe..... 0.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$900.00 for Part 3. Write that number here ----

**Describe Your Financial Assets** Part 4:

or exemptions 16. Cash

Current value of the portion you own? Do not deduct secured claims

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No.

Yes. Describe.....

Do you own or have any legal or equitable interest in any of the following?

0.00

Debtor 1 Claudia Case 18-10424 Doc 1 Filed 04/10/18 Entered 04/10/18 14:01:54 Desc Main Page 12 of 62 Document Page 12 of 62 Document

| 17. | Deposits of       | of money                               |  |                            |          |        |
|-----|-------------------|--|--|----------------------------|----------|--------|
|     |                   |  | or other financial accounts; certificates of deposit; shares in credit unions, broker you have multiple accounts with the same institution, list each.   | rage houses,               |          |        |
|     | Yes.              | Describe                               | Account Type: Institution name:  Checking Account Bank of America  |                            | \$<br>\$ | 200.00 |
| 18. |                   |  | ablicly traded stocks nent accounts with brokerage firms, money market accounts  |                            | <b>-</b> |        |
|     | Yes.              | Describe                               | Institution or issuer name:  |                            | \$       | 0.00   |
| 19. | Non-public<br>No. | cly traded stock                       | and interests in incorporated and unincorporated businesses, include   | ding an interest in        |          |        |
|     | Yes.              |  | Name of Entity and Percent of Ownership:   |                            | \$       | 0.00   |
| 20. | Negotiable        | instruments includ                     | bonds and other negotiable and non-negotiable instruments personal checks, cashiers' checks, promissory notes, and money orders. e those you cannot transfer to someone by signing or delivering them. |                            |          |        |
|     | Yes.              | Describe                               | ssuer name:  |                            | \$       | 0.00   |
| 21. |                   |  | ISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sha  | aring plans                |          |        |
|     | Yes.              | Describe                               | Type of account and Institution name:  |                            | \$       | 0.00   |
| 22. | Your share        |  | ayments  its you have made so that you may continue service or use from a company indlords, prepaid rent, public utilities (electric, gas, water), telecommunications                                  |                            |          |        |
|     | Yes.              | Describe                               | Institution name or individual:  |                            | \$       | 0.00   |
| 23. | Annuities<br>No.  | (A contract for a                      | periodic payment of money to you, either for life or for a number of   | years)                     | <u> </u> |        |
|     | Yes.              | Describe                               | Issuer name and description:   |                            | \$       | 0.00   |
| 24. |                   | n an education I<br>§§ 530(b)(1), 529A | RA, in an account in a qualified ABLE program, or under a qualified so), and $529(b)(1)$ .   | state tuition program.     |          |        |
|     | Yes.              | Describe                               | Institution name and description. Separately file the records of any inte  | erests.11 U.S.C. § 521(c): | \$       | 0.00   |
| 25. | Trusts, eq        | uitable or future                      | interests in property (other than anything listed in line 1), and rights   | s or powers                |          |        |
|     | Yes.              | Describe                               |  |                            | \$       | 0.00   |
| 26. | -                 |  | narks, trade secrets, and other intellectual property nes, websites, proceeds from royalties and licensing agreements  |                            |          |        |
|     | Yes.              | Describe                               |  |                            | \$       | 0.00   |
| 27. |                   |  | other general intangibles clusive licenses, cooperative association holdings, liquor licenses, professional li   | icenses                    |          |        |
|     | Yes.              | Describe                               |  |                            | \$       | 0.00   |

Case 18-10424 Doc 1 Claudia

Filed 04/10/18

Debtor 1

First Name Middle Name

| LIICU ,           | 04/ TO/ TO |
|-------------------|------------|
| Hines             | trosa      |
| <del>- 1 )^</del> | üment      |
|                   | arrierit   |
| Last Nam          | ne         |

Entered 04/10/18 14:01:54 Page 13 of 62 humber (if known) Desc Main

| Мо  | ney or proper       | rty owed to you   | 1?   | Current value of the portion you own? Do not deduct secured claims or exemptions |
|-----|---------------------|-------------------|--|--|
| 28. | Tax refunds         | owed to you       |  |  |
|     | No. Yes.            | Describe          |  | \$0.00   |
| 29. | Examples: Pa        |                   | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement   | · <del></del>  |
|     | Yes.                | Describe          |  | \$0.00   |
| 30. | Examples: Ur        |                   | wes you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, d loans you made to someone else         |  |
|     | Yes.                | Describe          |  | \$0.00   |
| 31. | Examples: He        |                   | ies r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Company Name & Beneficiary:                       |  |
|     | Yes.                | Describe          |  | \$0.00   |
| 32. | If you are the      |                   | at is due you from someone who has died iving trust, expect proceeds from a life insurance policy, or are currently entitled to receive as died. |  |
|     | Yes.                | Describe          |  | \$ 0.00  |
| 33. | _                   | -                 | s, whether or not you have filed a lawsuit or made a demand for payment ment disputes, insurance claims, or rights to sue                        | ·  |
|     | Yes.                | Describe          |  | \$0.00   |
| 34. | Other contin        | gent and unlic    | uidated claims of every nature, including counterclaims of the debtor and rights   |  |
|     | Yes.                | Describe          |  | \$0.00   |
| 35. | Any financia<br>No. | ıl assets you d   | id not already list  |  |
|     | Yes.                | Describe          |  | \$ <u> </u>  |
| 36. | Add the dolla       | ar value of all o | of your entries from Part 4, including any entries for pages you have attached   | \$200.00   |
|     | for Part 4. Wr      | rite that numbe   | er here>   | \$200.00   |
|     | ant or              |                   | iness-Related Property You Own or Have an Interest In. List any real estate in Part 1.   |  |
| 37. | No. Yes.            | or nave any le    | gal or equitable interest in any business-related property?  |  |
|     |                     |                   |  | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts re         | ceivable or co    | mmissions you already earned   |  |
|     | Yes.                | Describe          |  | \$0.00   |

Doc 1 Case 18-10424 Filed 04/10/18 Entered 04/10/18 14:01:54 Desc Main Claudia Page 14 of 62 humber (if known) Debtor 1 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Describe..... Yes. 0.00 41. Inventory No. Describe..... Yes. 0.00 42. Interests in partnerships or joint ventures Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations No. Yes. Describe..... 0.00 44. Any business-related property you did not already list Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ----Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Describe..... Yes 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Yes. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe..... 0.00 50. Farm and fishing supplies, chemicals, and feed No.

Schedule A/B: Property

0.00

0.00

\$0.00

Page 5 of 6

Yes. Describe.....

Describe.....

Yes.

Official Form 106A/B

51. Any farm- and commercial fishing-related property you did not already list

Record # 763903

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached

Claudia

Doc 1 Case 18-10424

62. Total personal property. Add lines 56 through 61. .....

63. Total of all property on Schedule A/B. Add line 55 + line 62

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Document Page 15 of 2 Jumber (if known)

\$ 9,400.00

Desc Main

\$ 9,400.00

\$9,400.00

Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Describe..... Yes. 0.00 \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... --> List the Totals of Each Part of this Form Part 8: \$ 0.00 55. Part 1: Total real estate, line 2 \$8,300.00 56. Part 2: Total vehicles, line 5 \$ 900.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 \$ 200.00 59. Part 5: Total business-related property, line 45 \$ 0.00 \$ 0.00 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 \$ 0.00

Record # 763903 Official Form 106A/B Page 6 of 6 Schedule A/B: Property

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| Fill in this information to identify your case: |                      |                                     |                            |  |
|---|----------------------|-------------------------------------|----------------------------|--|
| Debtor 1  | Claudia              |                                     | Hinestrosa                 |  |
|   | First Name           | Middle Name                         | Last Name                  |  |
| Debtor 2  |                      |                                     |                            |  |
| (Spouse, if filing)                             | First Name           | Middle Name                         | Last Name                  |  |
| United States                                   | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | <u>ILLINOIS</u><br>(State) |  |
| Case Number                                     | г                    |                                     | _                          |  |
| (If known)                                      |                      |                                     |                            |  |

# Official Form 106C

#### **Schedule C: The Property You Claim as Exempt**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| -   | Part 1: Identify the Property You Claim as Exempt   |                                      |                                       |                                    |  |  |  |  |
|---|---|--------------------------------------|---------------------------------------|------------------------------------|--|--|--|--|
| ·   | ons are you claiming? Check of  |                                      | •                                     |                                    |  |  |  |  |
| _   | state and federal nonbankruptcy   |                                      | 522(b)(3)                             |                                    |  |  |  |  |
| You are claiming for                            | ederal exemptions. 11 U.S.C. §  | 522(b)(2)                            |                                       |                                    |  |  |  |  |
|   |   |                                      |                                       |                                    |  |  |  |  |
| 2. For any property you                         | list on Schedule A/B that you   | claim as exempt, fill in th          | e information below.                  |                                    |  |  |  |  |
| Brief description of the Schedule A/B that list | ne property and line on<br>ts this property   | Current value of the portion you own | Amount of the exemption you claim     | Specific laws that allow exemption |  |  |  |  |
|   |   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption |                                    |  |  |  |  |
|   | Infiniti G35 with over 120,000  | 0.200                                |                                       | 735 ILCS 5/12-1001(c)              |  |  |  |  |
| description: miles                              | <u> </u>  | \$_8,300                             | \$2,550                               | 735 ILCS 5/12-1001(b)              |  |  |  |  |
| Line from                                       |   |                                      | 100% of fair market value, up to      |                                    |  |  |  |  |
| Schedule A/B: 03                                |   |                                      | any applicable statutory limit        |                                    |  |  |  |  |
| Brief Linen                                     | ns, small appliances, furniture   |                                      |                                       | 735 ILCS 5/12-1001(b)              |  |  |  |  |
| description:                                    |   | \$ <u>400</u>                        | \$400                                 |                                    |  |  |  |  |
| Line from                                       |   |                                      | 100% of fair market value, up to      |                                    |  |  |  |  |
| Schedule A/B: 06                                |   |                                      | any applicable statutory limit        |                                    |  |  |  |  |
| Brief TV, C                                     | Cell phone  |                                      |                                       | 735 ILCS 5/12-1001(b)              |  |  |  |  |
| description:                                    |   | \$                                   | \$200                                 |                                    |  |  |  |  |
| Line from                                       |   |                                      | 100% of fair market value, up to      |                                    |  |  |  |  |
| Schedule A/B: 07                                |   |                                      | any applicable statutory limit        |                                    |  |  |  |  |
| Brief Every                                     | yday clothes, shoes,  |                                      |                                       | 735 ILCS 5/12-1001(a),(e)          |  |  |  |  |
| ,   | ssories   | \$_200                               | \$200                                 |                                    |  |  |  |  |
| Line from                                       |   |                                      | 100% of fair market value, up to      |                                    |  |  |  |  |
| Schedule A/B: 11                                |   |                                      | any applicable statutory limit        |                                    |  |  |  |  |
| any approache statetery mine                    |   |                                      |                                       |                                    |  |  |  |  |
|   |   |                                      |                                       |                                    |  |  |  |  |
|   |   |                                      |                                       |                                    |  |  |  |  |
| Official Form 106C                              | Official Form 106C Record # 763903 Schedule C: The Property You Claim as Exempt Page 1 of 2 |                                      |                                       |                                    |  |  |  |  |

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Debtor 1 <u>Claudi</u>a

| rief description       | on of the property and line on<br>that lists this property | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |
|------------------------|--|--------------------------------------|---|------------------------------------|
|                        |  | Copy the value from Schedule A/B     | Check only one box for each exemption                           |                                    |
| ef<br>scription:       | Everyday jewelry, costume jewelry                          | \$ <u> </u>                          | \$100   | 735 ILCS 5/12-1001(b)              |
| ne from<br>hedule A/B: | 12   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| ef<br>scription:       | Checking Account, Bank of America, 200.00                  | \$200                                | \$_200  | 735 ILCS 5/12-1001(b)              |
| e from<br>hedule A/B:  | <u>17</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| bject to adju<br>No.   | stment on 4/01/19 and every 3 years                        | s after that for cases filed c       | on or after the date of adjustment .)                           |                                    |
| Yes. Did you           | acquire the property covered by the                        | e exemption within 1,215 c           | days before you filed this case?                                |                                    |
| Yes.                   |  |                                      |   |                                    |
|                        |  |                                      |   |                                    |
|                        |  |                                      |   |                                    |
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|                        |  |                                      |   |                                    |
|                        |  |                                      |   |                                    |

| Fill in this in               | Caco 19<br>formation to ident   |  | oc 1   | 19 Entor                        | ed 04/10/18<br>8 of 62 | 3 14:01:54  | Desc Main                                    |                          |
|-------------------------------|---|--|--|---------------------------------|------------------------|---|--|--------------------------|
| Debtor 1                      | Claudia   |  | Hinestro   | sa                              |                        |   |  |                          |
|                               | First Name  | Middle Name  | Last Name  |                                 |                        |   |  |                          |
| Debtor 2                      |   |  |  |                                 |                        |   |  |                          |
| (Spouse, if filing)           | First Name  | Middle Name  | Last Name  |                                 |                        |   |  |                          |
| United States                 | Bankruptcy Court for  | the : <u>NORTHERN</u>  | _ District of _ILLINOIS  |                                 |                        |   |  |                          |
| Case Number                   |   |  | (State)  |                                 |                        |   | Check if thi                                 | s is an                  |
| (If known)                    |   |  |  |                                 |                        |   | amended fi                                   | ling                     |
| Official Fo                   | orm 106D  |  |  |                                 |                        |   |  |                          |
| Schedule                      | D: Credito  | rs Who Have  | e Claims Secured I   | by Proper                       | ty                     |   |  | 12/15                    |
| 1. Do any cred No. Ch         | s, write your name<br>ditors have claims<br>eck this box and so<br>I in all of the inform | e and case number<br>s secured by your p<br>ubmit this form to th<br>nation below. | ,  |                                 |                        |   | •  |                          |
| Part 1:                       | List All Secured Cla  | nims   |  |                                 |                        | Column A  | Column A                                     | Column C                 |
| for each classifier As much a | aim. If more than   | one creditor has a p   | an one secured claim, list the c<br>articular claim, list the other cre<br>al order according to the credit    | editors in Part 2.<br>ors name. |                        | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Santano                   | der Consumer USA  | 4  | Describe the property that   |                                 | n:                     | \$ <u>5,779.00</u>                                    | \$ <u>8,300.00</u>                           | \$ <u>0.00</u>           |
| Creditor's Po Box             |   |  | 2008 Infiniti G35 with over  | 120,000 miles                   |                        |   |  |                          |
| Number                        | Street  |  |  |                                 |                        |   |  |                          |
|                               |   |  | As of the date you file, the   | claim is: Check a               | II that apply.         | _   |  |                          |
|                               |   |  | Contingent   |                                 | ,                      |   |  |                          |
| Ft Worth                      | n   | TX 76161   | Unliquidated   |                                 |                        |   |  |                          |
| City                          |   | State Zip Code   | Disputed   |                                 |                        |   |  |                          |
| Who owes                      | the debt? Check or  | ne.  | Nature of Lien. Check all the  | at apply.                       |                        |   |  |                          |
| Debtor 1                      | 1 only  |  | An agreement you made (  | such as mortgage                | or secured             |   |  |                          |
| Debtor 2                      | 2 only  |  | car loan)  |                                 |                        |   |  |                          |
| Debtor '                      | 1 and Debtor 2 only   |  | Statutory lien (such as tax  | lien, mechanic's lie            | en)                    |   |  |                          |
| At least                      | one of the debtors ar   | nd another   | Judgment lien from a laws  | uit                             |                        |   |  |                          |
| Check                         | if this claim relates   | to a   | Other (including a right to  | offset)                         |                        |   |  |                          |
|                               | unity debt  | 2016-05-17   | 1 4 4 -11 14 6 4   | mber 100                        | n                      |   |  |                          |
| Date Debt                     | was incurred  | 2010-03-17   | Last 4 digits of account nu  | mber100                         | <u> </u>               |   |  |                          |
| Part 2:                       | List Others to Be N   | otified for a Debt Tha   | at You Already Listed  |                                 |                        |   |  |                          |
| trying to collect             | from you for a deb  | ot you owe to someo<br>bts that you listed in                                      | out your bankruptcy for a debt t<br>ne else, list the creditor in Part '<br>Part 1, list the additional credit | 1, and then list th             | e collection agency    | here. Similarly, if yo                                | ou have more                                 |                          |
|                               |   |  |  |                                 |                        |   |  |                          |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$<u>5,779.00</u>

| Fill in t                           | Case 19 10/   |   | Eilad 04/10/19  | Entered 04/10/18<br>9 of 62  | 14:01:54                                | Desc Main                    | l                      |
|-------------------------------------|---|---|---|--|---|------------------------------|------------------------|
|                                     | Olavelia  |   | I Book and a second   |  |   |                              |                        |
| Debtor                              | 1 Claudia First Name  | Middle Name   | Hinestrosa  |  |   |                              |                        |
| Debtor                              |   | Middle Name   | Last Name   |  |   |                              |                        |
| (Spouse,                            |   | Middle Name   | Last Name   |  |   |                              |                        |
| 1,,,,,,                             | Olater Berlington On Africa   | NODTHERN BUILD  | II I INOIO  |  |   |                              |                        |
| United                              | States Bankruptcy Court for the : _   | NORTHERN District of  | _ILLINOIS<br>(State)  |  |   | Па                           |                        |
| Case N                              | lumber  |   |   |  |   |                              | f this is an           |
|                                     |   |   |   |  |   | amende                       | ea tiling              |
| Officia                             | al Form 106E/F  |   |   |  |   |                              |                        |
| Sched                               | ule E/F: Creditors  | Who Have Un   | secured Claims  |  |   |                              | 12/15                  |
| A/B: Prop<br>creditors<br>needed, c | ther party to any executory co<br>erty (Official Form 106A/B) and<br>with partially secured claims if<br>opy the Part you need, fill it of<br>additional pages, write your<br>List All of Your PRIORITY | nd on Schedule G: Exec<br>that are listed in Sched<br>ut, number the entries<br>name and case numbe | cutory Contracts and Une<br>lule D: Creditors Who Hav<br>in the boxes on the left. A      | xpired Leases (Official Form<br>re Claims Secured by Propert   | 106G). Do not inc<br>y. If more space i | lude any<br>s                |                        |
| 1. Do ar                            | ny creditors have priority unse   | ecured claims against y   | /ou?  |  |   |                              |                        |
| _                                   | o. Go to Part 2.  |   |   |  |   |                              |                        |
|                                     |   |   |   |  |   |                              |                        |
| each<br>nonpo                       | Ill of your priority unsecured of<br>claim listed, identify what type<br>riority amounts. As much as po<br>cured claims, fill out the Contin  | of claim it is. If a claim hasible, list the claims in uation Page of Part 1. If                    | nas both priority and nonpri<br>alphabetical order according<br>more than one creditor ho | ority amounts, list that claim heng to the creditor's name. If you<br>lds a particular claim, list the o | ere and show both<br>a have more than t | priority and<br>two priority |                        |
| (For a                              | an explanation of each type of o  | ciaim, see the instruction  | ns for this form in the instru  | iction dookiet.)   | Total claim                             | Priority                     | Nonpriority            |
|                                     | _   |   |   |  |   | amount                       | amount                 |
| Part 2:                             | List All of Your NONPRIOR   | RITY Unsecured Claims   |   |  |   |                              |                        |
| 3. Do ar                            | ny creditors have nonpriority i   | unsecured claims agair  | nst you?  |  |   |                              |                        |
| l ⊓ м                               | o. You have nothing to report   | in this part. Submit this   | form to the court with your   | other schedules.   |   |                              |                        |
|                                     | es.   | ·   | ·   |  |   |                              |                        |
| nonpi                               | II of your nonpriority unsecur<br>riority unsecured claim, list the<br>ded in Part 1. If more than one<br>s fill out the Continuation Page  | creditor separately for e   | ach claim. For each claim   | listed, identify what type of clai   | m it is. Do not list                    | claims already               |                        |
|                                     | AP1/Bstby   | Last  | I digite of account number  | NULL   |   |                              | Total claim<br>\$ 0.00 |
|                                     | editor's Name   | Last  | digits of account number  |  |   |                              | <u> </u>               |
| 26                                  | 6525 N Riverwoods Blvd  | When  | was the debt incurred?  | 2011-2013  |   |                              |                        |
| Nu                                  | umber Street  | As of   | the date you file, the claim  | is: Check all that apply.  |   |                              |                        |
|                                     | attaura "   |   | ontingent   | ,  |   |                              |                        |
| M Ci                                | ettawa IL<br>tv. State  | 60045<br>Zip Code   | nliquidated   |  |   |                              |                        |
|                                     | owes the debt? Check one.   | Di:   | sputed  |  |   |                              |                        |
| _ =                                 | Debtor 1 only   |   |   |  |   |                              |                        |
| _ =                                 | Debtor 2 only   |   | of NONPRIORITY unsecure   | d claim:   |   |                              |                        |
| _ =                                 | Debtor 1 and Debtor 2 only<br>At least one of the debtors and anot  |   | udent loans.<br>oligations arising out of a sepal   | ration agreement or divorce  |   |                              |                        |
| _ =                                 | theck if this claim relates to a  | <del>_</del>  | at you did not report as priority   |  |   |                              |                        |
| -,                                  | community debt  |   |   | g plans, and other similar debts   |   |                              |                        |
|                                     | e claim subject to offest?  | _   | <b></b>   | or O or 4% I I is  |   |                              |                        |
|                                     | √es   | Ot  | her. Specify <u>Credit Card o</u>   | or Credit Use  |   |                              |                        |

Case 18-10/24 | Doc 1 | Filed 0//10/18 | Entered 0//10/18 17:01:57 | Desc Main

| Debtor 1 | Claudia    | Case 10-10424 | DUCT |           | Page 20 of 62 Case Number (if known) | Desc Main |
|----------|------------|---------------|------|-----------|--------------------------------------|-----------|
|          | First Name | Middle Name   |      | Last Name |                                      |           |

| Part 2: Your NONPRIORITY Unsecured Claims           | Continuation Page   |                    |
|---|---|--------------------|
| After listing any entries on this page, number them | beginning with 4.4, followed by 4.5, and so forth.            | Total Claim        |
| 4.2 Capital ONE N.A.                                | Last 4 digits of account number 3678                          | \$ <u>375.00</u>   |
| Creditor's Name                                     | 0047.0040   |                    |
| 1717 Central St                                     | When was the debt incurred? 2017-2018                         |                    |
| Number Street                                       |   |                    |
|   | As of the date you file, the claim is: Check all that apply.  |                    |
|   | Contingent  |                    |
| Evanston IL 60201                                   | Unliquidated  |                    |
| City State Zip Code  Who owes the debt? Check one.  | Disputed  |                    |
| Debtor 1 only                                       | _   |                    |
| Debtor 2 only                                       | Type of NONPRIORITY unsecured claim:                          |                    |
| Debtor 1 and Debtor 2 only                          | Student loans.  |                    |
| At least one of the debtors and another             | Obligations arising out of a separation agreement or divorce  | <u> </u>           |
| Check if this claim relates to a                    | that you did not report as priority claims                    |                    |
| community debt                                      | Debts to pension or profit-sharing plans, and other similar d | ebts               |
| Is the claim subject to offest?                     | _   |                    |
| No  | Other. Specify Collecting for Creditor                        | _                  |
| Yes   |   |                    |
| 4.3 Capitalone                                      | Last 4 digits of account numberNULL                           | \$ <u>1,274.00</u> |
| Creditor's Name                                     | When was the debt incurred? 2015-2017                         |                    |
| 15000 Capital One Dr                                | when was the debt incurred?                                   |                    |
| Number Street                                       |   |                    |
|   | As of the date you file, the claim is: Check all that apply.  |                    |
| Richmond VA 23238                                   | Contingent  |                    |
| City State Zip Code                                 | Unliquidated  |                    |
| Who owes the debt? Check one.                       | Disputed  |                    |
| Debtor 1 only                                       |   |                    |
| Debtor 2 only                                       | Type of NONPRIORITY unsecured claim:                          |                    |
| Debtor 1 and Debtor 2 only                          | Student loans.  |                    |
| At least one of the debtors and another             | Obligations arising out of a separation agreement or divorce  | •                  |
| Check if this claim relates to a                    | that you did not report as priority claims                    |                    |
| community debt                                      | Debts to pension or profit-sharing plans, and other similar d | ebts               |
| Is the claim subject to offest?                     |   |                    |
| ■ No  | Other. Specify Credit Card or Credit Use                      | _                  |
| Yes CBNA  | Last 4 digits of account number NULL                          | <b>\$</b> 714.00   |
| Creditor's Name                                     | Last 4 digits of account number NULL                          | \$ <u>714.00</u>   |
| 50 Northwest Point Road                             | When was the debt incurred? 2016-2017                         |                    |
| Number Street                                       |   |                    |
|   | As of the date you file, the claim is: Check all that apply.  |                    |
|   | Contingent  |                    |
| Elk Grove Village IL 60007                          |   |                    |
| City State Zip Code                                 | Unliquidated  |                    |
| Who owes the debt? Check one.                       | Disputed  |                    |
| Debtor 1 only                                       |   |                    |
| Debtor 2 only                                       | Type of NONPRIORITY unsecured claim:                          |                    |
| Debtor 1 and Debtor 2 only                          | Student loans.  |                    |
| At least one of the debtors and another             | Obligations arising out of a separation agreement or divorce  |                    |
| Check if this claim relates to a                    | that you did not report as priority claims                    |                    |
| community debt Is the claim subject to offest?      | Debts to pension or profit-sharing plans, and other similar d | edis               |
| No  | Other. Specify Credit Card or Credit Use                      |                    |
| Yes   | Other, Specify Oreal Sala of Oreal Ose                        | <del>-</del>       |

Schedule E/F: Creditors Who Have Unsecured Claims

Case 18-10/24 | Doc 1 | Filed 0//10/18 | Entered 0//10/18 17:01:57 | Desc Main

| Debtor 1 | Claudia    | Case 10-10424 | DUCT |           | Page 21 of 62 Case Number (if known) | Desc Main |
|----------|------------|---------------|------|-----------|--------------------------------------|-----------|
|          | First Name | Middle Name   |      | Last Name |                                      |           |

| After I | isting any entries on this page, number them be   | eginning with 4.4, followed by 4.5, ar  | nd so forth.                   | Total Claim      |
|---------|---|---|--------------------------------|------------------|
| 4.5     | CCS/BRYANT STATE BANK                             | Last 4 digits of account number _   | NULL                           | <b>\$</b> 596.00 |
|         | Creditor's Name<br>500 E 60Th St N                | When was the debt incurred?   | 2016-2017                      |                  |
|         | Number Street                                     | Titles was the asst mountain.   |                                |                  |
|         |   | A - of the data way file the plains in  | A Charle all that annie.       |                  |
|         |   | As of the date you file, the claim is   | : Спеск ан тлат арргу.         |                  |
|         | Sioux Falls SD 57104                              | ☐ Contingent☐ Unliquidated  |                                |                  |
|         | City State Zip Code                               |   |                                |                  |
|         | Who owes the debt? Check one.                     | Disputed  |                                |                  |
|         | Debtor 1 only                                     |   |                                |                  |
|         | Debtor 2 only                                     | Type of NONPRIORITY unsecured   | claim:                         |                  |
|         | Debtor 1 and Debtor 2 only                        | Student loans.  |                                |                  |
|         | At least one of the debtors and another           | Obligations arising out of a separat  |                                |                  |
|         | Check if this claim relates to a community debt   | that you did not report as priority classification.  Debts to pension or profit-sharing p |                                |                  |
|         | Is the claim subject to offest?                   | Debts to pension of pront-sharing p   | orans, and other similar debts |                  |
|         | No  | Other. Specify Credit Card or   | Credit Use                     |                  |
|         | Yes   |   |                                |                  |
| 4.6     | CCS/FIRST SAVINGS BANK                            | Last 4 digits of account number _   | NULL                           | <b>\$</b> 549.00 |
|         | Creditor's Name                                   |   | 2016-2017                      |                  |
|         | 500 E 60Th St N                                   | When was the debt incurred?   | 2010-2017                      |                  |
|         | Number Street                                     |   |                                |                  |
|         |   | As of the date you file, the claim is   | : Check all that apply.        |                  |
|         | Sioux Falls SD 57104                              | Contingent  |                                |                  |
|         | City State Zip Code                               | Unliquidated  |                                |                  |
|         | Who owes the debt? Check one.                     | Disputed  |                                |                  |
|         | Debtor 1 only                                     |   |                                |                  |
|         | Debtor 2 only                                     | Type of NONPRIORITY unsecured   | claim:                         |                  |
|         | Debtor 1 and Debtor 2 only                        | Student loans.  |                                |                  |
|         | At least one of the debtors and another           | Obligations arising out of a separat  | tion agreement or divorce      |                  |
|         | Check if this claim relates to a                  | that you did not report as priority cl  |                                |                  |
|         | community debt Is the claim subject to offest?    | Debts to pension or profit-sharing p  | plans, and other similar debts |                  |
|         | No  | Credit Card or  | Cradit Llag                    |                  |
|         | Yes   | Other. Specify Credit Card or   | Credit Ose                     |                  |
| 4.7     | Comenitybank/Victoria                             | Last 4 digits of account number   | NULL                           | \$ 0.00          |
| 4.1     | Creditor's Name                                   |   | <del></del>                    |                  |
|         | Po Box 182789                                     | When was the debt incurred?   | 2015-2017                      |                  |
|         | Number Street                                     |   |                                |                  |
|         |   | As of the date you file, the claim is   | : Check all that apply.        |                  |
|         |   | Contingent  |                                |                  |
|         | Columbus OH 43218                                 | Unliquidated  |                                |                  |
|         | City State Zip Code Who owes the debt? Check one. | Disputed  |                                |                  |
|         | Debtor 1 only                                     | <del></del>   |                                |                  |
|         | Debtor 2 only                                     | Type of NONPRIORITY unsecured   | claim:                         |                  |
|         | Debtor 1 and Debtor 2 only                        | Student loans.  |                                |                  |
|         | At least one of the debtors and another           | Obligations arising out of a separat  | tion agreement or divorce      |                  |
|         | Check if this claim relates to a                  | that you did not report as priority cl  | aims                           |                  |
|         | community debt                                    | Debts to pension or profit-sharing p  | olans, and other similar debts |                  |
|         | Is the claim subject to offest?                   | <u>_</u>  |                                |                  |
|         | No  | Other. Specify Credit Card or   | Credit Use                     |                  |
|         | Yes   |   |                                |                  |

|          | Casc 10-10-2- | DUCI | 1 1100 04/10/10 |                                      | DC3C Main |
|----------|---------------|------|-----------------|--------------------------------------|-----------|
| Debtor 1 | Claudia       |      | Document        | Page 22 of 62 Case Number (if known) |           |
|          |               |      |                 |                                      |           |

Last Name

Middle Name

| After I | isting any entries on this page, number them b                      | eginning with 4.4, followed by 4.5, a         | nd so forth.   | Total Claim      |
|---------|---|---|--|------------------|
| 4.8     | Credit ONE BANK N.A.  | Last 4 digits of account number _             | 3794   | \$ <u>914.00</u> |
|         | Creditor's Name Po Box 1269   | When was the debt incurred?                   | 2017-2017  |                  |
|         | Number Street   | milen was the dept incurred?                  |  |                  |
|         |   | An of the data was file than at 1 1           | Observation of the state of the |                  |
|         |   | As of the date you file, the claim is         | : Uneck all that apply.  |                  |
|         | Greenville SC 29602   | Contingent                                    |  |                  |
|         | City State Zip Code   | Unliquidated Disputed                         |  |                  |
|         | Who owes the debt? Check one.                                       | ☐ pisputed                                    |  |                  |
|         | Debtor 1 only  Debtor 2 only  | Type of NONDBIODITY                           | alaim.   |                  |
|         | =   | Type of NONPRIORITY unsecured  Student loans. | ciaim:   |                  |
|         | Debtor 1 and Debtor 2 only  At least one of the debtors and another | Obligations arising out of a separat          | tion agreement or divorce  |                  |
|         | Check if this claim relates to a                                    | that you did not report as priority cl        | -  |                  |
|         | community debt  | Debts to pension or profit-sharing p          |  |                  |
|         | ls the claim subject to offest?                                     |   |  |                  |
|         | No  | Other. Specify Unknown Cred                   | lit Extension  |                  |
|         | L Yes   |   | All II   |                  |
| 4.9     | Credit ONE BANK NA  | Last 4 digits of account number _             | <u>NULL</u>  | \$ <u>0.00</u>   |
|         | Creditor's Name Po Box 98875  | When was the debt incurred?                   | 2015-2017  |                  |
|         | Number Street   |   |  |                  |
|         |   | As of the date you file, the claim is         | Check all that apply   |                  |
|         |   | Contingent                                    | . Опсок ан шас арріу.  |                  |
|         | Las Vegas NV 89193  | Unliquidated                                  |  |                  |
|         | City State Zip Code   | Disputed                                      |  |                  |
|         | Who owes the debt? Check one.                                       | <b>□</b>                                      |  |                  |
|         | Debtor 1 only  Debtor 2 only  | Type of NONDBIODITY                           | olaim  |                  |
|         | Debtor 2 only  Debtor 1 and Debtor 2 only                           | Type of NONPRIORITY unsecured  Student loans. | Ciaiii.  |                  |
|         | At least one of the debtors and another                             | Obligations arising out of a separat          | tion agreement or divorce  |                  |
|         | Check if this claim relates to a                                    | that you did not report as priority cl        | -  |                  |
|         | community debt  | Debts to pension or profit-sharing p          |  |                  |
|         | Is the claim subject to offest?                                     |   |  |                  |
|         | No  | Other. Specify Credit Card or                 | Credit Use   |                  |
|         | Liyes   |   | NI II I  | • 646 OO         |
| 4.10    | First Premier BANK  | Last 4 digits of account number _             | <u>NULL</u>  | \$ <u>646.00</u> |
|         | Creditor's Name 601 S Minnesota Ave                                 | When was the debt incurred?                   | 2016-2016  |                  |
|         | Number Street   |   |  |                  |
|         |   | As of the date you file, the claim is         | : Check all that apply   |                  |
|         |   | Contingent                                    | . Shook an triat appry.  |                  |
|         | Sioux Falls SD 57104  | Unliquidated                                  |  |                  |
|         | City State Zip Code  Who owes the debt? Check one.                  | Disputed                                      |  |                  |
|         | Debtor 1 only   | <b>_</b> '                                    |  |                  |
|         | Debtor 2 only   | Type of NONPRIORITY unsecured                 | claim:   |                  |
|         | Debtor 1 and Debtor 2 only  | Student loans.                                | Viuiiii.   |                  |
|         | At least one of the debtors and another                             | Obligations arising out of a separat          | tion agreement or divorce  |                  |
|         | Check if this claim relates to a                                    | that you did not report as priority cl        | -  |                  |
|         | community debt  | Debts to pension or profit-sharing p          |  |                  |
|         | Is the claim subject to offest?                                     |   |  |                  |
|         | No  | Other. Specify Credit Card or                 | Credit Use   |                  |
|         | Yes   |   |  |                  |

|          | Casc 10-10-24 | 1 1100 04/10/10 |                                      | DC3C Main |
|----------|---------------|-----------------|--------------------------------------|-----------|
| Debtor 1 | Claudia       | <br>Decument    | Page 23 of 62 Case Number (if known) |           |
|          |               |                 |                                      |           |

Last Name

Middle Name

| After li | isting any entries on this page, number them b | peginning with 4.4, followed by 4.5, and so forth.                | Total Claim      |
|----------|--|---|------------------|
| 4.11     | Mcydsnb  | Last 4 digits of account number NULL                              | <b>\$</b> 941.00 |
|          | Creditor's Name                                | <del></del>   |                  |
|          | Po Box 8218                                    | When was the debt incurred? 2016-2017                             |                  |
|          | Number Street                                  |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          |  | Contingent  |                  |
|          | Mason OH 45040                                 | Unliquidated  |                  |
|          | City State Zip Code                            | Disputed  |                  |
| '        | Who owes the debt? Check one.                  | Disputed  |                  |
|          | Debtor 1 only                                  |   |                  |
| !        | Debtor 2 only                                  | Type of NONPRIORITY unsecured claim:                              |                  |
| !        | Debtor 1 and Debtor 2 only                     | Student loans.  |                  |
|          | At least one of the debtors and another        | Obligations arising out of a separation agreement or divorce      |                  |
|          | Check if this claim relates to a               | that you did not report as priority claims                        |                  |
| Ι.       | community debt                                 | Debts to pension or profit-sharing plans, and other similar debts |                  |
| l i      | s the claim subject to offest?                 | Over the Overday of Over the Live                                 |                  |
|          | Yes  | Other. Specify Credit Card or Credit Use                          |                  |
| 4.40     | Resurgence Legal Group, PC                     | Last 4 digits of account number                                   | <b>\$</b> 989.00 |
| 4.12     | Creditor's Name                                | Last 4 digits of account number                                   | Ψ_000.00         |
|          | 1161 Lake Cook Road Suite E                    | When was the debt incurred?                                       |                  |
|          | Number Street                                  |   |                  |
|          |  | As of the date you file the claim is. Check all that apply        |                  |
|          | <del></del>                                    | As of the date you file, the claim is: Check all that apply.      |                  |
|          | Deerfield IL 60015                             | ☐ Contingent  |                  |
|          | City State Zip Code                            | Unliquidated  |                  |
| '        | Who owes the debt? Check one.                  | Disputed  |                  |
|          | Debtor 1 only                                  |   |                  |
|          | Debtor 2 only                                  | Type of NONPRIORITY unsecured claim:                              |                  |
|          | Debtor 1 and Debtor 2 only                     | Student loans.  |                  |
|          | At least one of the debtors and another        | Obligations arising out of a separation agreement or divorce      |                  |
|          | Check if this claim relates to a               | that you did not report as priority claims                        |                  |
| '        | community debt                                 | Debts to pension or profit-sharing plans, and other similar debts |                  |
|          | s the claim subject to offest?                 | _   |                  |
|          | No   | Other. Specify  |                  |
|          | Yes  | NIII.   | 500.00           |
| 4.13     | Syncb/OLD NAVY                                 | Last 4 digits of account number NULL                              | \$ <u>590.00</u> |
|          | Creditor's Name Po Box 965005                  | When was the debt incurred? 2016-2017                             |                  |
|          | Number Street                                  | When was the dept incurred:                                       |                  |
|          | Number Street                                  |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          | Orlando FL 32896                               | Contingent  |                  |
|          | City State Zip Code                            | Unliquidated  |                  |
| ١ ١      | Who owes the debt? Check one.                  | Disputed  |                  |
|          | Debtor 1 only                                  |   |                  |
|          | Debtor 2 only                                  | Type of NONPRIORITY unsecured claim:                              |                  |
|          | Debtor 1 and Debtor 2 only                     | Student loans.  |                  |
| [        | At least one of the debtors and another        | Obligations arising out of a separation agreement or divorce      |                  |
| ļ j      | Check if this claim relates to a               | that you did not report as priority claims                        |                  |
| '        | community debt                                 | Debts to pension or profit-sharing plans, and other similar debts |                  |
| !        | s the claim subject to offest?                 |   |                  |
|          | No   | Other. Specify Credit Card or Credit Use                          |                  |
|          | Yes  |   |                  |

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| Debtor 1 | Claudia    | Cusc 10 10-2- | DOC 1 |           | Page 24 of 62 Case Number (if known) | DC3C Main |
|----------|------------|---------------|-------|-----------|--------------------------------------|-----------|
|          | First Name | Middle Name   |       | Last Name |                                      |           |

| After listi | ng any entries on this page, number them be   | eginning with 4.4, followed by 4.5, and so forth.                 | Total Claim    |
|-------------|---|---|----------------|
| 4.14        | Syncb/TJX COS                                 | Last 4 digits of account number NULL                              | \$ <u>0.00</u> |
|             | reditor's Name                                | <del></del>   |                |
| <u>P</u>    | o Box 965005                                  | When was the debt incurred? 2016-2017                             |                |
| N           | lumber Street                                 |   |                |
|             |   | As of the date you file, the claim is: Check all that apply.      |                |
| -           |   | Contingent  |                |
|             | Orlando FL 32896                              | Unliquidated  |                |
|             | State Zip Code                                | Disputed  |                |
| _           | o owes the debt? Check one.                   | □   |                |
| _ =         | Debtor 1 only                                 |   |                |
| _ =         | Debtor 2 only                                 | Type of NONPRIORITY unsecured claim:                              |                |
| _ =         | Debtor 1 and Debtor 2 only                    | ☐ Student loans.  |                |
| ᅵ 날         | At least one of the debtors and another       | Obligations arising out of a separation agreement or divorce      |                |
|             | Check if this claim relates to a              | that you did not report as priority claims                        |                |
|             | community debt<br>he claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts |                |
|             | No  | Out on the Credit Card or Credit Lice                             |                |
| _ =         | Yes   | Other. Specify Credit Card or Credit Use                          |                |
|             | Syncb/Toysrus                                 | Last 4 digits of account number NULL                              | \$ 0.00        |
| 7.15        | reditor's Name                                | Last 4 digits of account number                                   | <u> </u>       |
|             | Po Box 965005                                 | When was the debt incurred? 2016-2017                             |                |
| _           | lumber Street                                 |   |                |
|             |   | As of the date you file the claim is. Check all that conty        |                |
| -           |   | As of the date you file, the claim is: Check all that apply.      |                |
|             | Orlando FL 32896                              | Contingent  |                |
|             | State Zip Code                                | Unliquidated  |                |
| Who         | o owes the debt? Check one.                   | Disputed  |                |
|             | Debtor 1 only                                 |   |                |
|             | Debtor 2 only                                 | Type of NONPRIORITY unsecured claim:                              |                |
|             | Debtor 1 and Debtor 2 only                    | Student loans.  |                |
|             | At least one of the debtors and another       | Obligations arising out of a separation agreement or divorce      |                |
| ΙП          | Check if this claim relates to a              | that you did not report as priority claims                        |                |
| _           | community debt                                | Debts to pension or profit-sharing plans, and other similar debts |                |
|             | he claim subject to offest?                   |   |                |
| _ =         | No  | Other. Specify Credit Card or Credit Use                          |                |
|             | Yes   | AUUL  |                |
| 4.10        | Syncb/Walmart                                 | Last 4 digits of account number NULL                              | \$ <u>0.00</u> |
|             | reditor's Name                                | When was the debt incurred? 2016-2017                             |                |
| _           | Po Box 965024                                 | when was the debt incurred?                                       |                |
| N           | lumber Street                                 |   |                |
| -           |   | As of the date you file, the claim is: Check all that apply.      |                |
|             | Orlanda El 22006                              | Contingent  |                |
| -           | Orlando FL 32896                              | Unliquidated  |                |
|             | State Zip Code o owes the debt? Check one.    | Disputed  |                |
|             | Debtor 1 only                                 | <del>-</del>  |                |
| _ =         | Debtor 2 only                                 | Type of NONPRIORITY unsecured claim:                              |                |
| _ =         | Debtor 1 and Debtor 2 only                    | Student loans.  |                |
| _ =         | At least one of the debtors and another       | Obligations arising out of a separation agreement or divorce      |                |
| _ =         | Check if this claim relates to a              | that you did not report as priority claims                        |                |
|             | community debt                                | Debts to pension or profit-sharing plans, and other similar debts |                |
|             | he claim subject to offest?                   |   |                |
|             | No  | Other. Specify Credit Card or Credit Use                          |                |
| Ι Π         | Yes   |   |                |

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|----------|---------------|------|-----------------|--------------------------------------|-----------|
| Debtor 1 | Claudia       |      | Decument        | Page 25 of 62 Case Number (if known) |           |

| After li | sting any entries on this page, number them b      | reginning with 4.4, followed by 4.5, and so forth.                | Total Claim        |
|----------|--|---|--------------------|
| 4.17     | Synchrony BANK                                     | Last 4 digits of account number5523                               | \$ <u>353.00</u>   |
|          | Creditor's Name                                    |   |                    |
|          | 120 Corporate Blvd Ste 1                           | When was the debt incurred? 2017-2017                             |                    |
|          | Number Street                                      |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |
|          |  |   |                    |
|          | Norfolk VA 23502                                   | ☐ Contingent  |                    |
|          | City State Zip Code                                | Unliquidated  |                    |
| \ \ \    | Who owes the debt? Check one.                      | Disputed  |                    |
|          | Debtor 1 only                                      |   |                    |
|          | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |
| Ī        | Debtor 1 and Debtor 2 only                         | Student loans.  |                    |
| İ        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |
| 1        | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |
| "        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                    |
| 1        | s the claim subject to offest?                     |   |                    |
|          | No   | Other. Specify Unknown Credit Extension                           |                    |
| Ī        | Yes  | Otter. Specify  |                    |
| 1 10     | Synchrony BANK                                     | Last 4 digits of account number0955                               | <b>\$</b> 582.00   |
| 4.18     | Creditor's Name                                    | Last 4 digits of account number                                   | ¥ <u></u>          |
|          | 120 Corporate Blvd Ste 1                           | When was the debt incurred? 2017-2017                             |                    |
|          | Number Street                                      |   |                    |
|          |  |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |
|          | Norfolk VA 23502                                   | Contingent  |                    |
|          |  | Unliquidated  |                    |
| v        | City State Zip Code  Who owes the debt? Check one. | Disputed  |                    |
| 1        | Debtor 1 only                                      |   |                    |
| l i      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |
| l i      | Debtor 1 and Debtor 2 only                         | Student loans.  |                    |
|          | =  | Obligations arising out of a separation agreement or divorce      |                    |
|          | At least one of the debtors and another            | <del>_</del>  |                    |
| [        | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |
| ١.,      | community debt<br>s the claim subject to offest?   | Debts to pension or profit-sharing plans, and other similar debts |                    |
| l i      | No   | Linkson Condit Estantian  |                    |
| li       | Yes  | Other. Specify Unknown Credit Extension                           |                    |
| <u> </u> | Synchrony BANK                                     | Last 4 digits of account number 8830                              | <b>\$</b> 1,113.00 |
| 4.19     |  | Last 4 digits of account number 8830                              | \$ 1,113.00        |
|          | Creditor's Name 120 Corporate Blvd Ste 1           | When was the debt incurred? 2017-2017                             |                    |
|          |  | Wileli was the dept incurred:                                     |                    |
|          | Number Street                                      |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |
|          |  | Contingent  |                    |
|          | Norfolk VA 23502                                   | Unliquidated  |                    |
| ١,       | City State Zip Code  Who owes the debt? Check one. | Disputed  |                    |
| li       |  |   |                    |
|          | Debtor 1 only                                      |   |                    |
|          | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |
| ļ        | Debtor 1 and Debtor 2 only                         | ☐ Student loans.  |                    |
| L        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |
|          | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |
|          | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                    |
|          | s the claim subject to offest?                     |   |                    |
|          | No   | Other. Specify Unknown Credit Extension                           |                    |
|          | Yes  |   |                    |

Case 18-10424 Doc 1 Filed 04/10/18 Entered 04/10/18 14:01:54 Desc Main Page 26 of 62 Case Number (if known) Document Claudia Debtor 1 First Name TD BANK USA/Targetcred NULL **\$** 1,315.00 4.20 Last 4 digits of account number Creditor's Name 2015-2017 Po Box 673 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Minneapolis MN 55440 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans. Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? Other. Specify Credit Card or Credit Use Yes List Others to Be Notified for a Debt That You Already Listed Part 3:

| 5 | <ul> <li>Use this page only if you have others to be notified al<br/>example, if a collection agency is trying to collect from<br/>2, then list the collection agency here. Similarly, if you<br/>additional creditors here. If you do not have additional</li> </ul> | n you<br>ı have | for a debt you<br>more than one | owe to someone else, list the original ecreditor for any of the debts that you | creditor in Parts 1 or<br>I listed in Parts 1 or 2, list the |
|---|---|-----------------|---------------------------------|--|--|
|   | Lake County Clerk, 17SC5510   |                 | _                               | On which entry in Part 1 or Part 2 li  | st the original creditor?                                    |
|   | Name<br>18 N. County St. Rm 101   |                 |                                 | Line 12 of (Check one):  | Part 1: Creditors with Priority Unsecured Claims             |
|   | Number Street   |                 | =                               |  | Part 2: Creditors with Nonpriority Unsecured Claims          |
|   |   |                 | -                               |  |  |
|   | Waukegan  | IL              | 60085                           | Last 4 digits of account number  | <del></del>  |
|   | City State  | e Zip C         | Code                            |  |  |

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Schedule E/F: Creditors Who Have Unsecured Claims

Claudia Debtor 1

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|                             |  |            | Total claim        |
|-----------------------------|--|------------|--------------------|
| Total claims<br>from Part 1 | 6a. Domestic support obligations   | 6a.        | \$0.00             |
|                             | 6b. Taxes and Certain other debts you owe the government   | 6b.        | \$0.00             |
|                             | 6c. Claims for death or personal injury while you were intoxicated   | 6c.        | \$0.00             |
|                             | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.   | 6d.        | \$0.00             |
|                             | 6e. <b>Total.</b> Add lines 6a through 6d.   | 6e.        | \$0.00             |
|                             |  |            |                    |
|                             |  |            | Total claim        |
| Total claims<br>from Part 2 | 6f. Student loans  | 6f.        | Total claim \$0.00 |
|                             | 6f. Student loans  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims                                       | 6f.<br>6g. |                    |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority   | •          | \$0.00             |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  6h. Debts to pension or profit-sharing plans, and other | 6g.        | \$                 |

|                 |  | Casa 19  |   | 1 Filod 0   | 1/1∩/1Q       | Entor      | ed 04/10         | /18 14:01:5         | 54 Des         | c Main           |       |
|-----------------|--|--|---|---|---------------|------------|------------------|---------------------|----------------|------------------|-------|
| FII             | l in this in                               | formation to ider  | itify your case:  |   |               |            | 8 of 62          |                     |                |                  |       |
| De              | ebtor 1                                    | Claudia  |   | Н   | linestrosa    |            |                  |                     |                |                  |       |
| D               | ebtor 2                                    | First Name   | Middle Name   | Las   | t Name        |            |                  |                     |                |                  |       |
|                 | oouse, if filing)                          | First Name   | Middle Name   | Las   | st Name       |            |                  |                     |                |                  |       |
| Ur              | nited States                               | Bankruptcy Court fo  | r the : <u>NORTHERN</u> [   | District of <u>ILLINOIS</u>   |               |            |                  |                     |                |                  |       |
|                 | ase Number<br>f known)                     |  |   | (St   | rate)         |            |                  |                     |                | Check if this is |       |
| Offi            | icial F                                    | orm 106G   |   |   |               |            |                  |                     |                | `                |       |
|                 |  |  | ory Contracts   | and Unexn   | ired I ea     | 242        |                  |                     |                |                  | 12/15 |
| nforn<br>additi | nation. If n ional page  o you hav  No. Ch | nore space is needs, write your named any executory eck this box and s | possible. If two marrieded, copy the additions and case number (if contracts or unexpired submit this form to the contract of | nal page, fill it out, r<br>f known).<br>d leases?<br>court with your other | schedules. Yo | tries, and | attach it to thi | s page. On the top  | p of any       |                  |       |
| e               | -  | nt, vehicle lease,   | or company with who<br>cell phone). See the i   | =   |               |            |                  |                     |                | nd               |       |
|                 | Person or                                  | company with w   | hom you have the con  | ntract or lease   |               |            | State wh         | nat the contract or | r lease is for |                  |       |
| 2.1             |  |  |   |   |               |            |                  |                     |                |                  |       |
|                 | Name                                       |  |   |   |               |            |                  |                     |                |                  |       |
|                 | Number                                     | Street   |   |   |               |            |                  |                     |                |                  |       |
|                 | City                                       |  |   | State Zip Code  |               |            |                  |                     |                |                  |       |
| 2.2             |  |  |   |   |               |            |                  |                     |                |                  |       |
|                 | Name                                       |  |   |   |               |            |                  |                     |                |                  |       |
|                 | Number                                     | Street   |   |   |               |            |                  |                     |                |                  |       |
|                 | City                                       |  |   | State Zip Code  |               |            |                  |                     |                |                  |       |
| 2.3             |  |  |   |   |               |            |                  |                     |                |                  |       |
|                 | Name                                       |  |   |   |               |            |                  |                     |                |                  |       |
|                 | Number                                     | Street   |   |   |               |            |                  |                     |                |                  |       |
|                 | City                                       |  |   | State Zip Code  |               |            |                  |                     |                |                  |       |
| 2.4             |  |  |   |   |               |            |                  |                     |                |                  |       |
|                 | Name                                       |  |   |   |               |            |                  |                     |                |                  |       |
|                 | Number                                     | Street   |   |   |               |            |                  |                     |                |                  |       |
|                 | City                                       |  |   | State Zip Code  |               |            |                  |                     |                |                  |       |
| 2.5             |  |  |   |   |               |            |                  |                     |                |                  |       |
|                 | Name                                       |  |   |   |               |            |                  |                     |                |                  |       |
|                 | Number                                     | Street   |   |   |               |            |                  |                     |                |                  |       |

State Zip Code

City

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| Fill in this inf    | Fill in this information to identify your case: |   |            |  |  |  |
|---------------------|---|---|------------|--|--|--|
| Debtor 1            | Claudia   |   | Hinestrosa |  |  |  |
|                     | First Name                                      | Middle Name                                 | Last Name  |  |  |  |
| Debtor 2            | -   |   |            |  |  |  |
| (Spouse, if filing) | First Name                                      | Middle Name                                 | Last Name  |  |  |  |
| United States       | Bankruptcy Court for                            | the : <u>NORTHERN</u> District of <u>IL</u> |            |  |  |  |
| Case Number         | (State)   |   |            |  |  |  |
| (If known)          |   |   |            |  |  |  |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| ally A   | any Additional Pages, write your name and case number (if known). Answer every question.                 |                                      |   |           |   |  |  |  |  |  |
|--|--|--------------------------------------|---|-----------|---|--|--|--|--|--|
| 1. <b>I</b>  | 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) |                                      |   |           |   |  |  |  |  |  |
|  | ■ No.  |                                      |   |           |   |  |  |  |  |  |
| Yes  |  |                                      |   |           |   |  |  |  |  |  |
| 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Lousiiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) |  |                                      |   |           |   |  |  |  |  |  |
|  | No. Go to line 3.  |                                      |   |           |   |  |  |  |  |  |
| [  | Yes  |                                      | ouse, or legal equivalent live with you at  | the time? |   |  |  |  |  |  |
|  | F  | No Yes Inwhich community state       | te or territory did you live?   | Fi        | I in the name and current address of that person. |  |  |  |  |  |
|  |  | 1                                    |   |           |   |  |  |  |  |  |
|  |  | Name of your spouse, former spouse o | r legal equivalent  |           |   |  |  |  |  |  |
|  |  | Number Street                        |   |           |   |  |  |  |  |  |
|  |  | City                                 | State   | Zip Code  |   |  |  |  |  |  |
|  |  |                                      | • •   | -         | r spouse is filing with you. List the person      |  |  |  |  |  |
|  |  | =                                    | only if that person is a guarantor or co<br>hedule E/F (Official Form 106E/F), or S | _         |   |  |  |  |  |  |
|  |  | ule E/F, or Schedule G to fill o     |   | ,         | ,   |  |  |  |  |  |
|  | Colur  | mn 1: Your codebtor                  |   |           | Column 2: The creditor to whom you owe the debt   |  |  |  |  |  |
|  |  |                                      |   |           | Check all schedules that apply:                   |  |  |  |  |  |
| 3.1  |  |                                      |   |           | Schedule D, line                                  |  |  |  |  |  |
|  | Name   | е                                    |   |           | Schedule E/F, line                                |  |  |  |  |  |
|  | Num  | ber Street                           |   |           | Schedule G, line                                  |  |  |  |  |  |
|  | City   |                                      | State   | Zip Code  |   |  |  |  |  |  |
| 3.2  |  |                                      |   |           | Schedule D, line                                  |  |  |  |  |  |
|  | Name   | e                                    |   |           | Schedule E/F, line                                |  |  |  |  |  |
|  | Num  | ber Street                           |   |           | Schedule G, line                                  |  |  |  |  |  |
|  | City   |                                      | State   | Zip Code  |   |  |  |  |  |  |
| 3.3  |  |                                      |   |           | Schedule D, line                                  |  |  |  |  |  |
|  | Name   | e                                    |   |           | Schedule E/F, line                                |  |  |  |  |  |
|  | Num  | ber Street                           |   |           | Schedule G, line                                  |  |  |  |  |  |
|  | City   |                                      | State   | Zip Code  |   |  |  |  |  |  |

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|                    |                    |                 | 74 A A A A A A A A A A A A A A A A A A A | - B 01 02                                |
|--------------------|--------------------|-----------------|--|--|
| Fill in this ir    | formation to ident | tify your case: |  |  |
| Debtor 1           | Claudia            |                 | Hinestrosa                               |  |
|                    | First Name         | Middle Name     | Last Name                                |  |
| Debtor 2           |                    |                 |  |  |
| Spouse, if filing) | First Name         | Middle Name     | Last Name                                |  |
| Case Numbe         | r                  |                 |  | Check if this is:                        |
| (If known)         | ·                  |                 | <del></del>                              | An amended filing                        |
|                    |                    |                 |  | 1 = ·                                    |
| •                  |                    |                 |  | A supplement showing post-petition       |
|                    |                    |                 |  | chapter 13 income as of the following da |
| fficial F          | orm 106I           |                 |  |  |
| illoidi i          | <u> </u>           |                 |  | MM / DD / YYYY                           |

#### **Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa   | Tt 1: Describe Employment  |                                  |   |              |                                   |  |  |
|--|--|----------------------------------|---|--------------|-----------------------------------|--|--|
| 1.   | Fill in your employment information  |                                  | Debtor 1  |              | Debtor 2 or non-filing spouse     |  |  |
|  | If you have more than one job, attach a separate page with information about additional employers.   | Employment status                | X Employed Not employed                                     |              | Employed  Not employed            |  |  |
|  | Include part-time, seasonal, or self-employed work.  | Occupation                       | Student Support   |              |                                   |  |  |
|  | Occupation may Include student or homemaker, if it applies.  | Employers name Employers address | Lake Zurich Comr<br>400 S. Old Rand R<br>Lake Zurich, IL 60 |              |                                   |  |  |
|  |  | How long employed there?         | Since 1/1/2016  |              |                                   |  |  |
| Pa   | Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. |                                  |   |              |                                   |  |  |
|  |  |                                  |   | For Debtor 1 | For Debtor 2 or non-filing spouse |  |  |
| List monthly gross wages, salary and commissions (before all payro deductions). If not paid monthly, calculate what the monthly wage wou |  |                                  | •   | \$2,206.00   | \$0.00                            |  |  |
| 3.   | Estimate and list monthly overti   |                                  | \$0.00  | \$0.00       |                                   |  |  |
| 4.   | Calculate gross income. Add line   | e 2 + line 3.                    |   | \$2,206.00   | \$0.00                            |  |  |

 Official Form 106I
 Record # 763903
 Schedule I: Your Income
 Page 1 of 3

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Claudia Debtor 1

First Name Middle Name Last Name Case Number (if known) \_

|                |  |   |              | For Debtor 1             |      | For Debtor 2 or<br>non-filing spouse |     |            |
|----------------|--|---|--------------|--------------------------|------|--------------------------------------|-----|------------|
|                | Copy   | line 4 here   | 4.           | \$2,206.00               |      | \$0.00                               | ]   |            |
| 5. <b>L</b> i  | st all   | payroll deductions:   |              |                          |      |                                      |     |            |
|                | 5a. <b>T</b>   | ax, Medicare, and Social Security deductions  | 5a.          | \$414.06                 |      | \$0.00                               |     |            |
|                | 5b. <b>N</b>   | landatory contributions for retirement plans  | 5b.          | \$100.80                 |      | \$0.00                               |     |            |
|                | 5c. <b>V</b>   | oluntary contributions for retirement plans   | 5c.          | \$0.00                   |      | \$0.00                               |     |            |
|                | 5d. <b>F</b>   | Required repayments of retirement fund loans  | 5d.          | \$0.00                   |      | \$0.00                               |     |            |
|                | 5e. lı   | nsurance  | 5e.          | \$0.00                   |      | \$0.00                               |     |            |
|                | 5f. <b>C</b>   | Oomestic support obligations  | 5f.          | \$0.00                   |      | \$0.00                               |     |            |
|                | 5g. <b>L</b>   | Inion dues  | 5g.          | \$0.00                   |      | \$0.00                               |     |            |
|                | 5h. <b>C</b>   | Other deductions. Specify:  | 5h.          | \$0.00                   |      | \$0.00                               |     |            |
| 6. <b>A</b> c  | ld the   | <b>payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.  | 6.           | \$514.86                 |      | \$0.00                               |     |            |
| 7. <b>C</b> a  | lcula  | te total monthly take-home pay. Subtract line 6 from line 4.  | 7.           | \$1,691.14               | ſ    | \$0.00                               |     |            |
| 8. <b>Li</b> s | st all   | other income regularly received:  |              |                          | ٠    |                                      | 1   |            |
|                | 8a.  | Net income from rental property and from operating a business,  |              |                          |      |                                      |     |            |
|                |  | profession, or farm   |              |                          |      |                                      |     |            |
|                |  | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total |              |                          |      |                                      |     |            |
|                |  | monthly net income.   | 8a.          | \$0.00                   |      | \$0.00                               |     |            |
|                | 8b.  | Interest and dividends  | 8b.          | \$0.00                   |      | \$0.00                               |     |            |
|                | 8c.  | Family support payments that you, a non-filing spouse, or a   | 8c.          | \$ 1000.00               |      | \$ 0.00                              |     |            |
|                |  | dependent regularly receive   |              |                          |      |                                      |     |            |
|                |  | Include alimony, spousal support, child support, maintenance, divorce   |              |                          |      |                                      |     |            |
|                |  | settlement, and property settlement.  |              |                          |      |                                      |     |            |
|                | 8d.  | Unemployment compensation   | 8d.          | \$0.00                   |      | \$0.00                               |     |            |
|                | 8e.  | Social Security   | 8e.          | \$0.00                   |      | \$0.00                               |     |            |
|                | 8f.  | Other government assistance that you regularly receive  | 8f.          | \$0.00                   |      | \$0.00                               |     |            |
|                |  | Include cash assistance and the value (if known) of any non-cash  |              |                          |      |                                      |     |            |
|                |  | assistance that you receive, such as food stamps (benefits under the  |              |                          |      |                                      |     |            |
|                |  | Supplemental Nutrition Assistance Program) or housing subsidies.  |              |                          |      |                                      |     |            |
|                |  | Specify:  |              |                          |      |                                      |     |            |
|                | 8g.  | Pension or retirement income  | 8g.          | \$0.00                   | _    | \$0.00                               |     |            |
|                | 8h.  | Other monthly income. Specify: Second J0b,  | 8h.          | \$175.00                 | _    | \$0.00                               |     |            |
| 9.             | Add  | <b>all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 9.           | \$1,175.00               | -    | \$0.00                               |     |            |
| 10.            |  | ulate monthly income. Add line 7 + line 9.  | 10.          | \$2,866.14               | + Г  | \$0.00                               | = [ | \$2,866.14 |
|                | Add  | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |              |                          | _    |                                      | _   |            |
| 11.            | State  | e all other regular contributions to the expenses that you list in Schedule   | e <i>J</i> . |                          |      |                                      |     |            |
|                | Inclu  | de contributions from an unmarried partner, members of your household, yo   | our depend   | ents, your roommates, ar | d    |                                      |     |            |
|                |  | friends or relatives.   |              |                          |      |                                      |     |            |
|                |  | ot include any amounts already included in lines 2-10 or amounts that are r   |              |                          | n Sc | hedule J.                            |     |            |
|                | Spec   | ify:  |              |                          |      |                                      | 11. | \$0.00     |
| 12.            | 1 .  |   |              |                          |      |                                      |     | \$2,866.14 |
|                | Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies \$2 |   |              |                          |      |                                      |     |            |
| 13.            |  | ou expect an increase or decrease within the year after you file this form  | 1?           |                          |      |                                      |     |            |
|                | x I  |   |              |                          |      |                                      |     |            |
|                | Π,   | es. Explain:  |              |                          |      |                                      |     |            |
|                |  |   |              |                          |      |                                      |     |            |

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Case Number (if known)

Claudia Debtor 1 Case Number (if known) First Name Middle Name Last Name Part 3: **Additional Employment Information** Debtor 1 Occupation **Nail Tech** Employers name **Foxxy Nails Spa Employers address** 2745 W. Hartigan Road Fox Lake, IL 60020 How long employed there?

 Official Form 106I
 Record # 763903
 Schedule I: Your Income
 Page 3 of 3

| Fill in this i                  | nformation to identify you                      | ur case:                    |                              |   |  |                                |  |  |
|---------------------------------|---|-----------------------------|------------------------------|---|--|--------------------------------|--|--|
| Debtor 1                        | Claudia   |                             | Hinestrosa                   | Check if this is:   |  |                                |  |  |
| B.110                           | First Name                                      | Middle Name                 | Last Name                    | ı <b>=</b>  | An amended filing                      |                                |  |  |
| Debtor 2<br>(Spouse, if filing) | First Name                                      | Middle Name                 | Last Name                    | <del>-</del>  | ent snowing post<br>of the following o | :-petition chapter 13<br>late: |  |  |
| United State                    | s Bankruptcy Court for the :                    | NORTHERN DISTRICT C         | OF ILLINOIS                  |   |  |                                |  |  |
| Case Numbe                      | er  |                             |                              | MM / DD / Y   | YYYY                                   |                                |  |  |
|                                 |   |                             |                              | A separate  | filing for Debtor                      | 2 because Debtor 2             |  |  |
| Official F                      | Form 106J                                       |                             |                              | maintains a   | separate house                         | ehold.                         |  |  |
| Schedu                          | le J: Your Exp                                  | enses                       |                              |   |  | 12/15                          |  |  |
| =                               |   |                             |                              | are equally responsible for supplyinges, write your name and case num | _                                      |                                |  |  |
| Part 1:                         | Describe Your Household                         |                             |                              |   |  |                                |  |  |
| 1. Is this a jo                 | oint case? Go to line 2.                        |                             |                              |   |  |                                |  |  |
|                                 | Does Debtor 2 live in a se                      | eparate household?          |                              |   |  |                                |  |  |
|                                 | No.   |                             |                              |   |  |                                |  |  |
|                                 | Yes. Debtor 2 must                              | file a separate Schedu      | le J.                        |   |  |                                |  |  |
|                                 | have dependents?                                | No No                       |                              | Dependent's relationship to<br>Debtor 1 or Debtor 2                   | Dependent's age                        | Does dependent live with you?  |  |  |
| Do not l                        | list Debtor 1 and<br>2.                         |                             | this information for dent    |   |  | No                             |  |  |
| Do not :                        | state the dependents'                           |                             |                              | Son   | 17                                     | X Yes                          |  |  |
| names.                          |   |                             |                              | Son   | 14                                     | No                             |  |  |
|                                 |   |                             |                              |   |  | Yes                            |  |  |
|                                 |   |                             |                              | Daughter  | 10                                     | No<br>X Vos                    |  |  |
|                                 |   |                             |                              |   |  | Yes X No                       |  |  |
|                                 |   |                             |                              |   |  | Yes                            |  |  |
|                                 |   |                             |                              |   |  | X No                           |  |  |
|                                 |   |                             |                              |   |  | Yes                            |  |  |
| -                               | r expenses include                              | X No                        |                              |   |  |                                |  |  |
|                                 | es of people other than if and your dependents? | Yes                         |                              |   |  |                                |  |  |
| Part 2:                         | Estimate Your Ongoing Mo                        | nthly Expenses              |                              |   |  |                                |  |  |
| Estimate you                    | r expenses as of your bar                       | nkruptcy filing date un     | less you are using this form | n as a supplement in a Chapter 13 o                                   | case to report                         |                                |  |  |
| expenses as the applicable      | ·   | ptcy is filed. If this is a | supplemental Schedule J,     | check the box at the top of the forr                                  | m and fill in                          |                                |  |  |
| Include expe                    | nses paid for with non-cas                      | =                           | nce if you know the value    |   |  |                                |  |  |
| of such assis                   | tance and have included                         | it on Schedule I: Your      | Income (Official Form 106I.) | )   |  | our expenses                   |  |  |
|                                 | -   | xpenses for your resid      | ence. Include first mortgage | payments and  |  | \$1,100.00                     |  |  |
| -                               | It for the ground or lot.                       |                             |                              |   | 4.                                     | \$1,100.00                     |  |  |
|                                 | eal estate taxes                                |                             |                              |   | 4a.                                    | \$0.00                         |  |  |
|                                 | ear estate taxes<br>roperty, homeowner's, or re | enter's insurance           |                              |   | 4a.<br>4b.                             | \$0.00                         |  |  |
|                                 | ome maintenance, repair,                        |                             |                              |   | 4c.                                    | \$0.00                         |  |  |
|                                 | omeowner's association or                       |                             |                              |   | 4d.                                    | \$0.00                         |  |  |
|                                 |   |                             |                              |   |  |                                |  |  |

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Document

Claudia

Debtor 1

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Case Number (if known)

First Name Middle Name Last Name Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$0.00 6a. 6a. Electricity, heat, natural gas \$0.00 6b. Water, sewer, garbage collection \$125.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$700.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$65.00 9. Clothing, laundry, and dry cleaning 10. \$60.00 10. Personal care products and services \$40.00 11. Medical and dental expenses 11. \$215.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$35.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 Charitable contributions and religious donations 14. 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$160.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$157.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:\_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. 20c. Property, homeowner's, or renter's insurance \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Official Form 106J Record # 763903

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Claudia Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name \$5.00 21. Other. Specify: \_\_\_Postage/Bank Fees (\$5.00), 21. \$2,662.00 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$2,866.14 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$2,662.00 23b. Copy your monthly expenses from line 22 above. 23b.-\$204.14 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 763903 Schedule J: Your Expenses Page 3 of 3

| Fill in this in           | Fill in this information to identify your case: |                                   |                  |  |  |  |  |
|---------------------------|---|-----------------------------------|------------------|--|--|--|--|
| Debtor 1                  | Claudia   |                                   | Hinestrosa       |  |  |  |  |
|                           | First Name                                      | Middle Name                       | Last Name        |  |  |  |  |
| Debtor 2                  |   |                                   |                  |  |  |  |  |
| (Spouse, if filing)       | First Name                                      | Middle Name                       | Last Name        |  |  |  |  |
| United States Case Number |   | the : <u>NORTHERN</u> District of | ILLINOIS (State) |  |  |  |  |
| (If known)                |   |                                   |                  |  |  |  |  |

# Official Form 106 Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below   |   |
|--|---|
| Did you pay or agree to pay someone who is NOT an                | attorney to help you fill out bankruptcy forms?   |
| No   |   |
| Yes. Name of Person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|  |   |
|  |   |
|  |   |
| Under penalty of perjury, I declare that I have read th correct. | e summary and schedules filed with this declaration and that they are true and                |
|  |   |
| 🗶 /s/ Claudia Hinestrosa   | <b>x</b>  |
| Signature of Debtor 1  | Signature of Debtor 2   |
| Date_04/04/2018  | Date  |
| MM / DD / YYYY   | MM / DD / YYYY  |
|  |   |

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|                           |                  | D                                       | ocument rat      |  |
|---------------------------|------------------|---|------------------|--|
| Fill in this in           | formation to ide | entify your case:                       |                  |  |
| Debtor 1                  | Claudia          |   | Hinestrosa       |  |
|                           | First Name       | Middle Name                             | Last Name        |  |
| Debtor 2                  |                  |   |                  |  |
| (Spouse, if filing)       | First Name       | Middle Name                             | Last Name        |  |
| United States             | Bankruptcy Court | for the : <u>NORTHERN</u> District of _ | ILLINOIS (State) |  |
| Case Number<br>(If known) | r                |   | _                |  |
|                           |                  |   |                  |  |

### Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

| information. If more space is needed, attach a separate sheet to<br>number (if known). Answer every question.  | this form. On the to          | p of any additional pages, write your name and case |                               |
|--|-------------------------------|---|-------------------------------|
| Part 1: Give Details About Your Marital Status and Where Yo  | ou Lived Before               |   |                               |
| 01. What is your current marital status?   |                               |   |                               |
| Married  |                               |   |                               |
| Not married  |                               |   |                               |
| 02 During the last 3 years, have you lived anywhere other tha  | n where you live nov          | v?  |                               |
| No.  | and the street and a second   | P. co. co. co.                                      |                               |
| Yes. List all of the places you lived in the last 3 years. Do  | o not include where yo        | ou live now.  |                               |
| Debtor 1   | Dates Debtor 1<br>lived there | Debtor 2:   | Dates Debtor 2<br>lived there |
| 03 Within the last 8 years, did you ever live with a spouse of property states and territories include Arizona, California, and Wisconsin.)  No.  Yes. Make sure you fill out Schedule H: Your Codebtors ( | Idaho, Louisiana, Ne          |   |                               |
|  |                               |   |                               |
|  |                               |   |                               |
|  |                               |   |                               |
|  |                               |   |                               |
|  |                               |   |                               |
|  |                               |   |                               |
|  |                               |   |                               |
|  |                               |   |                               |
|  |                               |   |                               |
|  |                               |   |                               |
|  |                               |   |                               |
|  |                               |   |                               |

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Page 38 of 62 Document Debtor 1 Claudia Hinestrosa Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) \$6,618 Wages, commissions, Wages, commissions, From January 1 of current year until bonuses, tips bonuses, tips \$700 (1099) the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, \$17,697 Wages, commissions, For last calendar year: bonuses, tips bonuses, tips \$4,608 (1099 income) (January 1 to December 31, 2017) Operating a business Operating a business Wages, commissions, Wages, commissions, \$4,302 For the calendar year before that: bonuses, tips bonuses, tips \$6,563 (1099 income) (January 1 to December 31, 2016) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Child Support \$4,000 From January 1 of current year until the date you filed for bankruptcy: Child Support \$12,000 For last calendar year: (January 1 to December 31, 2017) Child Support \$12,000 For last calendar year: (January 1 to December 31, 2016)

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Debtor 1 Claudia Hinestrosa Case Number (if known) \_\_\_\_\_\_\_

| Par          |  |  |  |  |   |
|--------------|--|--|--|--|---|
|              | List Certain Payments You Made Before You File   | ed for Bankruptcy                              |  |  |   |
| 06 <b>A</b>  | Are either Debtor 1's or Debtor 2's debts primarily co   | nsumer debts?                                  |  |  |   |
| Ε            | No. Neither Debtor 1 nor Debtor 2 has primarily c  | onsumer debts. Co                              | nsumer debts are defir                             | ned in 11 U.S.C. § 101(8) a  | as  |
|              | "incurred by an individual primarily for a persor  | -  |  |  |   |
|              | During the 90 days before you filed for bankrup  | otcy, did you pay any                          | creditor a total of \$6,4                          | 25* or more?   |   |
|              | ☐ No. Go to line 7.  |  |  |  |   |
|              | Yes. List below each creditor to whom you  | paid a total of \$6,42                         | 25* or more in one or m                            | nore payments and the  |   |
|              | total amount you paid that creditor. Do not  |  | • •  | -  |   |
|              | child support and alimony. Also, do not inc  * Subject to adjustment on 4/01/19 and every 3 yea  | · ·  | -  |  |   |
|              | ,,,  |  |  |  |   |
|              | Yes. Debtor 1 or Debtor 2 or both have primarily   |  |  |  |   |
|              | During the 90 days before you filed for bankru   | iptcy, did you pay ar                          | ny creditor a total of \$60                        | UU or more?  |   |
|              | No. Go to line 7.  |  |  |  |   |
|              | Yes. List below each creditor to whom you  | paid a total of \$600                          | or more and the total a                            | amount you paid that   |   |
|              | creditor. Do not include payments for dom-   | estic support obligati                         | ions, such as child sup                            | port and   |   |
|              | alimony. Also, do not include payments to  | an attorney for this b                         | oankruptcy case.                                   |  |   |
|              |  |  |  |  |   |
|              |  | Dates of payments                              | Total amount paid                                  | Amount you still   | owe Was this payment for                        |
|              |  |  |  |  |   |
| Ir<br>c<br>a | Within 1 year before you filed for bankruptcy, did you m<br>nsiders include your relatives; any general partners; rel<br>corporations of which you are an officer, director, person<br>agent, including one for a business you operate as a so<br>such as child support and alimony. | latives of any genera<br>n in control, or owne | l partners; partnership<br>r of 20% or more of the | s of which you are a general services; and an are securities; and an are securities. | ny managing                                     |
|              | No.  |  |  |  |   |
|              | Yes. List all payments to an insider.  | Dates of                                       | Total amount                                       | A  | Decree for this recover                         |
|              |  | Dates of payment                               | Total amount paid                                  | Amount you still owe   | Reason for this payment                         |
|              | Within 1 year before you filed for bankruptcy, did you m<br>an insider?  | ake any payments o                             | r transfer any property                            | on account of a debt that  | benefited                                       |
| ~            | nclude payments on debts guaranteed or cosigned by   | an insider.                                    |  |  |   |
| Ir           | No.  |  |  |  |   |
|              |  |  |  |  |   |
|              | Yes. List all payments to an insider.  | Datas of                                       | Tatal amazont                                      | A  | Danas fauthia assurant                          |
|              | Yes. List all payments to an insider.  | Dates of payment                               | Total amount paid                                  | Amount you still owe   | Reason for this payment Include creditor's name |

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<u>Claudia</u> Hinestrosa Case Number (if known) First Name Middle Name Last Name Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Yes. Fill in the details. Nature of the case Court or agency Status of the case Pending LVNV Funding v. Debtor Contract. Lake County On appeal 17SC5510 ☐ Concluded Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11 Yes. Fill in the information below. 11 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No. Go to line 11 Yes. Fill in the information below. 12 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No. Yes. **List Certain Gifts and Contributions** 13 Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No. Yes. Fill in the details for each gift. 14 Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift. List Certain Losses Part 6: 15 Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No. Yes. Fill in the details for each gift. **List Certain Payments or Transfers** Part 7: 16 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. П No. Yes. Fill in the details

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Case Number (if known) \_

|                   | First Name Middle Name  | e Last Name  |   |  |   |
|-------------------|---|--|---|--|---|
|                   | Party Contact Info  | Description and value  | of any property transferred   | Date payment or transfer   | Amount of paymen                            |
|                   | Geraci Law L.L.C.   |  |   |  | Payment/Value:                              |
|                   | 55 E. Monroe Street #3400   | _  |   |  | \$4,000.00: \$0.00                          |
|                   |   | <del>_</del>   |   |  | paid prior to filing,<br>balance to be paid |
|                   | Chicago,IL 60603  |  |   |  | through the plan.                           |
|                   | -   |  |   |  | -   |
|                   | Darty Contest Info  | Description and value  | of any manager transferred  | Data waymaant  | Amount of novemen                           |
|                   | Party Contact Info  |  | of any property transferred   | Date payment<br>or transfer  | Amount of paymen                            |
|                   | Hananwill Credit Counseling   | Credit Counseling Service  | ces   | 2018   | \$25.00                                     |
|                   | 115 N. Cross St.  |  |   |  |   |
|                   | Robinson, IL 62454  |  |   |  |   |
|                   |   |  |   |  |   |
|                   |   |  |   |  |   |
|                   |   |  |   |  |   |
|                   |   |  |   |  |   |
|                   |   |  |   |  |   |
|                   | ithin 1 year before you filed for bankru  |  |   | er any property to anyone  | who   |
|                   | romised to help you deal with your cred<br>o not include any payment or transfer t  |  | creditors?  |  |   |
| ľ                 | No.   |  |   |  |   |
|                   | Yes. Fill in the details.   |  |   |  |   |
| v                 | /ithin 2 years before you filed for bankru  | uptcy, did you sell, trade, or otherwi   | ise transfer any property to  | anvone, other than proper  | tv  |
|                   | ansferred in the ordinary course of you   |  | , , , , , , , , , , , , , , , , , , ,   | ,                                | •   |
|                   | clude both outright transfers and trans<br>o not include gifts and transfers that yo  | _ ·  |   | st or mortgage on your pro   | operty).                                    |
| ı                 | No.   |  |   |  |   |
| Ē                 | Yes. Fill in the details for each gift.   |  |   |  |   |
|                   | _   |  |   |  |   |
|                   | /ithin 10 years before you filed for bank<br>eneficiary? (These are often called asse   |  | y to a self-settled trust or si   | milar device of which you  | are a                                       |
|                   | No.   |  |   |  |   |
| ı                 |   |  |   |  |   |
| -                 | Yes. Fill in the details for each gift.   |  |   |  |   |
| -                 | Yes. Fill in the details for each gift.   |  |   |  |   |
|                   |   | nstruments, Safe Deposit Boxes, and S  | torage Units  |  |   |
|                   | E: List Certain Financial Accounts, In  |  | -   | ame or for your benefit c  | losed.                                      |
|                   |   |  | -   | ame, or for your benefit, c  | losed,                                      |
| V<br>s<br>Ir      | List Certain Financial Accounts, In<br>//ithin 1 year before you filed for bankrupold, moved, or transferred?<br>nclude checking, savings, money marke  | ptcy, were any financial accounts or   | r instruments held in your na   |  | •   |
| V<br>S<br>Ir      | List Certain Financial Accounts, In<br>/ithin 1 year before you filed for bankru<br>old, moved, or transferred?   | ptcy, were any financial accounts or   | r instruments held in your na   |  | •   |
| l<br>s<br>h       | List Certain Financial Accounts, In<br>//ithin 1 year before you filed for bankrupold, moved, or transferred?<br>nclude checking, savings, money marke  | ptcy, were any financial accounts or   | r instruments held in your na   |  | •   |
| L<br>S<br>Ir      | List Certain Financial Accounts, In<br>lithin 1 year before you filed for bankrup<br>old, moved, or transferred?<br>nclude checking, savings, money marke<br>ouses, pension funds, cooperatives, as                                   | ptcy, were any financial accounts or   | r instruments held in your na   |  | •   |
| V<br>s<br>Ir      | List Certain Financial Accounts, In<br>lithin 1 year before you filed for bankrup<br>old, moved, or transferred?<br>actude checking, savings, money marke<br>ouses, pension funds, cooperatives, as<br>No.                            | ptcy, were any financial accounts or   | r instruments held in your na   | banks, credit unions, brok   | •   |
| V<br>s<br>Ir<br>h | List Certain Financial Accounts, In<br>Jithin 1 year before you filed for bankrup<br>old, moved, or transferred?<br>nclude checking, savings, money marke<br>ouses, pension funds, cooperatives, as<br>No.  Yes. Fill in the details. | ptcy, were any financial accounts or<br>et, or other financial accounts; certif<br>sociations, and other financial instit<br>Last 4 digits of account number | r instruments held in your naticates of deposit; shares in tutions.  Type of account or instrument                                | Date account was closed, sold, moved, or transferred                   | st balance before<br>sing or transfer       |
| V s Ir h          | List Certain Financial Accounts, In<br>lithin 1 year before you filed for bankrup<br>old, moved, or transferred?<br>actude checking, savings, money marke<br>ouses, pension funds, cooperatives, as<br>No.                            | ptcy, were any financial accounts or<br>et, or other financial accounts; certif<br>sociations, and other financial insti                                     | r instruments held in your naticates of deposit; shares in tutions.  Type of account or instrument  Checking                      | Date account was closed, sold, moved, or transferred  Some time in the | st balance before<br>sing or transfer       |
| V s Ir h          | List Certain Financial Accounts, In<br>Jithin 1 year before you filed for bankrup<br>old, moved, or transferred?<br>nclude checking, savings, money marke<br>ouses, pension funds, cooperatives, as<br>No.  Yes. Fill in the details. | ptcy, were any financial accounts or<br>et, or other financial accounts; certif<br>sociations, and other financial instit<br>Last 4 digits of account number | r instruments held in your naticates of deposit; shares in tutions.  Type of account or instrument  Checking                      | Date account was closed, sold, moved, or transferred                   | st balance before<br>sing or transfer       |
| V s Ir            | List Certain Financial Accounts, In<br>Jithin 1 year before you filed for bankrup<br>old, moved, or transferred?<br>nclude checking, savings, money marke<br>ouses, pension funds, cooperatives, as<br>No.  Yes. Fill in the details. | ptcy, were any financial accounts or<br>et, or other financial accounts; certif<br>sociations, and other financial instit<br>Last 4 digits of account number | r instruments held in your naticates of deposit; shares in tutions.  Type of account or instrument  Checking Savings              | Date account was closed, sold, moved, or transferred  Some time in the | st balance before<br>sing or transfer       |
| V s Ir            | List Certain Financial Accounts, In<br>Jithin 1 year before you filed for bankrup<br>old, moved, or transferred?<br>nclude checking, savings, money marke<br>ouses, pension funds, cooperatives, as<br>No.  Yes. Fill in the details. | ptcy, were any financial accounts or<br>et, or other financial accounts; certif<br>sociations, and other financial instit<br>Last 4 digits of account number | r instruments held in your naticates of deposit; shares in tutions.  Type of account or instrument  Checking Savings Money market | Date account was closed, sold, moved, or transferred  Some time in the | st balance before<br>sing or transfer       |

Claudia

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Hinestrosa

Claudia Case Number (if known) First Name Middle Name Last Name 21 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No. Yes. Fill in the details. Who else had access to it? Describe the contents Do you still 22 Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No. Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? **Identify Property You Hold or Control for Someone Else** Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Value **Give Details About Environmental Information** Part 10: For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24 Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No. Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 25 Have you notified any governmental unit of any release of hazardous material? No. Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 26 Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Nature of the case Status of the case Court or agency Give Details About Your Business or Connections to Any Business Part 11: 27 Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation

Debtor 1

Case 18-10424 Doc 1 Filed 04/10/18 Entered 04/10/18 14:01:54 Desc Main

| Debtor 1      | Claudia  |  | Hinestrosa  | Case Number (if known)  |
|---------------|--|--|---|---|
|               | First Name                                       | Middle Name  | Last Name   |   |
|               |  | ve applies. Go to Part 12.  apply above and fill in the det                    | ails below for each busine                            | ess.  |
| _             |  |  |   |   |
|               | thin 2 years before y<br>titutions, creditors, o |  | you give a financial stat                             | ement to anyone about your business? Include all financial  |
| _             | No.  |  |   |   |
| Ц             | Yes. Fill in the detail                          | S.  Date is:   | sued  |   |
| Part 12       | 2: Sign Below                                    |  |   |   |
| ansv<br>in co | vers are true and cor                            | rrect. I understand that mak<br>kruptcy case can result in f<br>519, and 3571. | ing a false statement, co ines up to \$250,000, or in | nments, and I declare under penalty of perjury that the ncealing property, or obtaining money or property by fraud nprisonment for up to 20 years, or both. |
|               | Signature of Debtor                              | 1  | Signa   | ture of Debtor 2  |
|               | Date 04/04/2018 MM / DD / Y                      | YYYY   | Date  | MM / DD / YYYY  |
| Did y         | you attach additiona                             | I pages to Your Statement of   | of Financial Affairs for In                           | dividuals Filing for Bankruptcy (Official Form 107)?  |
|               | No   |  |   |   |
|               | Yes  |  |   |   |
| Did y         | you pay or agree to p                            | oay someone who is not an  | attorney to help you fill                             | out bankruptcy forms?   |
|               | No   |  |   |   |
|               | Yes. Name of persor                              | n  |   | . Attach the Bankruptcy Petition Preparer's Notice,   |

Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In 1 | re                        |                                |                                   |   |  |                                       |                          |                                       |           |
|------|---------------------------|--------------------------------|-----------------------------------|---|--|---------------------------------------|--------------------------|---------------------------------------|-----------|
| Cla  | udia Hines                | strosa / Debto                 | r                                 |   |  |                                       | Case No:                 |                                       |           |
|      |                           |                                |                                   |   |  |                                       | Chapter:                 | Chapter 13                            |           |
|      |                           |                                | DISCL                             | OSURE OF CO   | MPENSATION (                             | OF ATTORNEY                           | FOR DEF                  | RTOR                                  |           |
|      | npensation p              | paid to me with                | 329(a) and Fed<br>nin one year be | Bankr. P. 2016(lefore the filing of the lebtor(s) in contents | b), I certify that I the petition in ban | am the attorney for kruptcy, or agree | or the aboved to be paid | e named debtor(<br>d to me, for servi | ices      |
|      | For legal                 | services, I hav                | e agreed to acc                   | ept   | \$4,000.00                               |                                       |                          |                                       |           |
|      | Prior to th               | ne filing of this              | statement I ha                    | ve received   | \$0.00                                   |                                       |                          |                                       |           |
|      | Balance I                 | Due                            |                                   |   | \$4,000.00                               |                                       |                          |                                       |           |
| 2.   | The source                | e of the compe                 | ensation paid to                  | me was:   |  |                                       |                          |                                       |           |
|      | Deb                       | otor(s)                        | Other: (sp                        | pecify)   |  |                                       |                          |                                       |           |
| 3.   | The source                | e of compensa                  | tion to be paid                   | to me is:   |  |                                       |                          |                                       |           |
|      | De                        | btor(s)                        | Other: (sp                        | necify)   |  |                                       |                          |                                       |           |
| 4.   |                           | e not agreed to<br>y law firm. |                                   | ve-disclosed comp   | ensation with any                        | other person un                       | less they ar             | e members and a                       | ssociates |
|      |                           | y law firm. A                  |                                   | isclosed compensatement, together                             |  |                                       |                          |                                       |           |
| 5.   | In return for case, inclu |                                | isclosed fee, I l                 | have agreed to ren  | der legal service                        | for all aspects of                    | the bankru               | ptcy                                  |           |
|      |                           |                                | tor' s financial :                | situation, and reno   | lering advice to th                      | ne debtor in deter                    | mining who               | ether to file a pet                   | ition in  |
|      |                           | ruptcy;                        | · · · · ·                         | 1 11  |  | 1 1 1:1                               | 1                        |                                       |           |
|      | -                         |                                |                                   | on, schedules, sta  |  | -                                     |                          |                                       | C         |
|      | c. Repre                  | esentation of the              | ne debtor at the                  | meeting of credit   | ors and confirmat                        | tion hearing, and                     | any adjour               | ned hearings the                      | reof;     |
| 6.   | By agreen                 | nent with the d                | ebtor(s), the ab                  | ove-disclosed fee   | does not include                         | the following ser                     | vice:                    |                                       |           |
|      |                           |                                |                                   |   |  |                                       |                          |                                       |           |
|      |                           |                                | _                                 | ing is a complete   | •  | agreement or arra                     | •                        | or                                    |           |
|      |                           | Date: 04/                      | 05/2018                           |   | /s/ Scott Justin C                       | Greenwood                             |                          |                                       |           |
|      |                           | Date                           |                                   | <del></del>   | Signature of Atto                        |                                       | _                        |                                       |           |
|      |                           |                                |                                   |   | Geraci Law L.L.                          | .C                                    |                          |                                       |           |

763903 Page 1 of 1 Record #

Name of law firm

Case 18-10424

1 Doc 1 File **Gerato Liaw Lebt ©**red 04/10/18 14:01:54 National Headquardes USP TEMP In The Microsoft State Office Offi

Desc Main

Date: 3/30/2018

Consultation Attorney: MAA

Record #: 763-903



| Attorney Retainer Agreement Chapter 13   |             |
|--|-------------|
| X The undersigned hires Geraci Law L.L.C. for representation in a Chapter 13 bankruptcy. I have signed and received a copy of any  |             |
| x The undersigned nires Geraci Law L.L.C. for representation in a Ghapter 13 Debtors and their Attorneys" Any terms that "Court-Approved Retention Agreement" (CARA) or "Rights and Responsibilities" (RR) between Chapter 13 Debtors and their Attorneys" Any terms that  |             |
| "Coult-Approved Retention Agreement" (CARA) or Rights and Responsibilities (RR) between chapter 13 Bankruptcy shall be \$1,000 or the fee stated conflict with it are null and void. I agree to comply with those terms. Attorney fees for filed Chapter 13 instead even though it usually costs more.   | in          |
| conflict with it are null and void. I agree to comply with those terms. Automey less for file Chapter 13 instead even though it usually costs more.  |             |
| the CARA or RR if applicable. Have been advised of my Chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more.   |             |
| the CARA or RR if applicable. That been advised of my shapes and read all material on it and the Geraci Law Website.  More than 1-attorney or paralegal will work on my case. I will use CLIENT CORNER and read all material on it and the Geraci Law Website.   | ÷           |
| work of this does NOT INCLUDE court filing cost of \$310, credit counseling or financial management classes. Any amount not paid by me   | •           |
| prior to the case being filed shall be paid ahead of creditors through the Chapter 13 Trustee. The CARA fee is a flat fee, but my attorneys may apply to the   |             |
| prior to the case being filed shall be paid alread of cledifors through a prior to the case being filed shall be paid alread of cledifors through a prior to the case being filed shall be paid alread of cledifors through a prior to the case being filed shall be paid alread of cledifors through a prior to the case being filed shall be paid alread of cledifors through a prior to the case being filed shall be paid alread of cledifors through a prior to the case being filed shall be paid alread of cledifors through a prior to the case being filed shall be paid alread of cledifors through a prior to the case being filed shall be paid alread of cledifors through a prior to the case being filed shall be paid alread of cledifors through a prior to the case being filed shall be paid alread of cledifors through a prior to the case being filed shall be paid alread of cledifors through a prior to the case being filed shall be paid a prior to the case being filed shall be paid a prior to the case being filed shall be paid at the case and through a prior to the case being filed shall be paid at the case and through a prior to the case being filed shall be paid at the case and through a prior to the case being filed shall be paid at the case and through a prior to the case being filed shall be paid at the case and through a prior to the | ۹,          |
| adroits if allowed by the CADA or court order, such as excessive work, motions, evidentiary fleatings, adversally proceedings of appeals. I does not necessive   | ,           |
| " I amount retainers" for pro-filing and pro-confirmation work hecome property of this lifti oil payment, and are deposited into the lifting   |             |
| the parametric and the province of a power of pourly basis, but flat the usually results in me naving less. Payinglist are applied to the matter in the contract   | ٥.          |
| is terminated by either party prior to the filling of the case, we will refund linearned fees. If I close my life, my case is distributed or breach this contract ragion   | ,           |
| to the country dame in Micropolin Loop submit fee disputes to binding arbitration Within 30 days with the visconsin Lawyers fund for orient  |             |
| Doy 7450 Modison Milesonoin D.O. Doy 7450 Modison Mileson 101/2/158) I assign to my attorney all amounts tendered as timing tees of court cools of   | .Hu         |
| and the size August a transfer said funds from his trust account to his operating account in payment of all outstanding less owed by the nodes to not mode   | •           |
| t J V AMARIAN FARE and easts not noid hotors my creditors notice microscopic will vehicles sufficient to be paid in the plant, start   |             |
| will be a selected to got a goal payment to cover depreciation each month, like \$10-100, until attorney rees are paid, then the vehicle   | ж           |
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| and mornage and a section may but not as much on my vehicle and mornage arrears and other creditors. So I will to do in y best to complete the plant   |             |
| Injury or other claims or property I now have or acquire after filling Chapter 15, I must disclose to Geraci law and the chapter 15 disclose   |             |
| The state of the s |             |
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| Chanter 42 novement which may cause it to increase 1 safee to read my delition and study it before signing it of   | ) l         |
| A CONTROL OF THE PROPERTY OF T |             |
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| s and the same of each to the Tructon unless I am already naving my creditors 100%. If my income of expenses change, my plan payme   | 31 I L      |
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| and the seminancian award, personal injury or other court settlement. I MUST notify my attorney initiately and i may have to pay some or all of the tan  | us          |
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| 1 % / Manual includes all dakto lifet injudes blan states otherwise. I may be bland sollic discussion and particular and the provider of the p | 2et         |
| NOT include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interes.  NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interes.   | <i>,</i> 01 |
| NOT include include future mortgage, refit, condo fees and support payments, similar incorporation including any taxes or HOA fees as long as the unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any taxes or HOA fees as long as the  |             |
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| property is in my name; other range in the result of the result          | ,           |
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| Debte not discharged if not paid in trill: student IOSNS, enticational debts, tax debt interest, united or late field tax debte, united or late field tax debt |             |
| debts support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge.  | in          |
| A Burner and the design to the first and the Denth interpretate the Case Clustic Delinium to the forest of the first and the control of the case cluster of the case c |             |
| x Our Representation is limited to Bankruptcy Court and state court, or in loan modifications, short sales, etc. Any delay in filing could result in judgments or liens we can't eliminate in bankrupcy. When this case is state court, or in loan modifications, short sales, etc. Any delay in filing could result in judgments or liens we can't eliminate in bankrupcy. When this case is  |             |
| / Nr. of I   |             |
| Changes after this: I cannot transfer any property or incur any credit or debt without the express permission or my attention or the open  | 41.         |
| and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition.  | t in        |
| 1) // All this to remain current in a domestic support (DOU). (I dill to bellify to the boart that i have fortained account the count that i have for the count that i have fortained account the count that i have for the count that it is a count to be account to the count that it is a count to be account t |             |
| DSO or mortgage payments, or if I fail to take my financial management class. I have received the 11 U.S.C § 527(a) disclosures on a separate sheet.   |             |
| 11 bol W. Ol x   |             |
| X (Joint Debtor)   |             |
| 37.11C   |             |
| Dated: 7/8/18  |             |
| Attorney for the Debtor(s) Representing Geraci Law L.L.C. rev 171129   |             |

### UNITED STATES BANKRUP FCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



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- 3. Personally review with the debtor and stage of the completed perition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



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- 2. Inform the debtor that the debtor must be punctual and in the debtor fail the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307 (a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

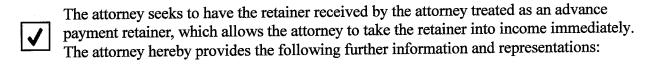


# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



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- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank]



### Case 18-10424 Doc 1 Filed 04/10/18 Entered 04/10/18 14:01:54 Desc Main F. ALLOWANCE AND PAYMENT OF CATTOR OF STATE OF AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 3 /30/ 18

Signed;

Debtor(s)

Co-Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

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 CHAPTER (3) FLAN ACKNOWLEDS MENT

|          |   |  | .   9 -                            |  | _                                       |             |
|----------|---|--|------------------------------------|--|---|-------------|
| I,       | and Pa  | Linest<br>the following are to                       | ne terms being p                   | acknowledge that                       | I have reviewed my                      | ,           |
| The tol  | al amount to be paid to the True  | stee is estimated to<br>change depending             | be \$ 7266<br>on the claims fi     | I will pay \$<br>led, and the total    | 200 per month fo                        | r at        |
| Any sc   | heduled increases are as follow   | rs:  |                                    |  |   |             |
| This in  | cludes:   |  |                                    |  |   |             |
| 1.       | These vehicles:   |  |                                    |  |   |             |
|          | These other secured debts: _  |  |                                    |  |   |             |
| 3.       | Tax debt of \$  | Support debt of                                      | \$ <u> </u>                        | _ Mortgage arre                        | ars of \$                               |             |
| 4.       | Other:  |  |                                    | · · · · · · · · · · · · · · · · · · ·  |   |             |
| Mortga   | ges are provided for as follo   | ws:  |                                    |  |   |             |
| _/\_     | Raid direct to the creditor eve   | ery month  | Included in m                      | y plan payment                         | N/                                      | A           |
| All of r | ny)debts are being paid in my   | y Chapter 13 exce                                    | pt the following                   | that I am payin                        | g direct:                               |             |
| Q        | The following vehicle(s):   | 2008 la  | fint: 63                           | 5                                      | ,                                       |             |
|          |   | PAYING   |                                    | ERMENT                                 | N/A)                                    |             |
|          | Other:  |  |                                    |  | $\overline{}$                           |             |
|          | R TERMS   |  |                                    |  |   |             |
| have h   | i understand that my attoments and my case is dismissed and my case is dismissed and they may all if my case is dismissed or co | ed or converted be<br>have otherwise be<br>onverted. | en paid, which m                   | re paid, any sect<br>nay prevent me fi | rom keeping the                         | Л           |
| 1        | I understand my plan payr<br>y check, I <u>must</u> set it aside and  | send it to the Trus                                  | itee.                              |  |   | cted        |
| 4        | I must pay the Trustee an   | y non-exempt pro                                     | ceeds I receive fi                 | rom any cause o                        | raction.                                |             |
| peceive  | I <u>will</u> notify my attorneys is<br>an inheritance, or otherwise be   | f I am injured, have<br>ecome entitled to r          | the right to sue<br>eceive any sum | anyone for any i<br>of money during    | reason, win the lotte<br>my bankruptcy. | ry,         |
| 1.       | I must be signed up for cl  | ient corner and tex                                  | ting so my attori                  | neys can commu                         | nicate with me.                         |             |
| - }      | I will notify my attorneys it   | f I move, change n                                   | ny phone numbe                     | r or change or lo                      | se my job.                              |             |
| 7        | I <u>must</u> provide my attorne<br>stee unless my attorney specifi   |  | v returns every v                  | ear, and will turn                     | over my tax refund                      | <u>l to</u> |
| пө тти   | Siee unless my daomey apass   |  |                                    |  |   | _           |
| Other: _ |   |  |                                    |  |   |             |
|          |   |  |                                    |  |   |             |
| ,        | 1 / the   | fire   |                                    | · · ·                                  | Date:                                   | -(8         |
| `        | For Geraci La   | w: x   | at It                              | · ·                                    | Date: 44/18                             |             |
|          | , 5. 52.4   |  |                                    |  |   |             |

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Claudia Hinestrosa / Debtor Bankruptcy Docket #:

Judge:

| <b>VERIFIC</b> | ATION | $\triangle$ E | CDEDI: |     | RAAT | <b>TDIV</b> |
|----------------|-------|---------------|--------|-----|------|-------------|
| VERIFIC        | AIIUN | UF            | CKEDI  | IUR | IVIA |             |

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 04/04/2018 /s/ Claudia Hinestrosa

Claudia Hinestrosa

X Date & Sign

Record # 763903 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

### UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Claudia Hinestrosa / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### **Chapter 11:** Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 04/04/2018 | /s/ Claudia Hinestrosa           |   |
|-------------------|----------------------------------|---|
|                   | Claudia Hinestrosa               | _ |
| Dated: 04/05/2018 | /s/ Scott Justin Greenwood       |   |
|                   | Attorney: Scott Justin Greenwood | _ |

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| Debt | or 1   | Claudia  |   | Hinestrosa  |  |  |
|------|--|--|---|---|--|--|
|      |  | First Name   | Middle Name   | Last Name   | Case Number (if known  | 1)   |
| Pa   | rt 6:  | Answer These Question  | s for Reporting Purposes  |   |  |  |
| 16.  |  | nt kind of debts do<br>have?   | as "incurred by a No. Go to lined Yes, Go to find 16b. Are your debts             |   | al, family, or household purpos  3usiness debts are debts that y | se."   |
|      |  |  | ☐No. Go to lin<br>☐Yes. Go to li  | e 16c.  |  | iveatient.   |
|      |  |  |   |   |  |  |
| 17.  | Do y<br>any e<br>exclu<br>admi<br>are p<br>avail | you filing under oter 7?  ou estimate that after exempt property is uded and nistrative expenses aid that funds will be able for distribution secured creditors? | Yes. I am filing u  | ng under Chapter 7. Go to line 18<br>nder Chapter 7. Do you estimate<br>ve expenses are paid that funds v | that after any exempt property                                   | is excluded and unsecured creditors?   |
|      |  | many creditors do<br>estimate that you   | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999                                       | ☐ 1,000-5,000<br>☐ 5,001-10,00<br>☐ 10,001-25,0   | 0  | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000   |
|      |  | much do you<br>ate your assets to<br>orth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 millic | \$50,000,00   | 1-\$50 million<br>1-\$100 million                                | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion  More than \$50 billion     |
| 1    | estim<br>to be                                   | nuch do you<br>ate your liabilities<br>}<br>Sign Below   | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | 0 \$50,000,00   | -\$50 million<br>1-\$100 million                                 | □\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion □ More than \$50 billion |
| or y | ou   |  | I have examined this per<br>correct.  | tition, and I declare under penalty   | of perjury that the information                                  | provided is true and   |
| ٠    |  |  | If I have chosen to file up<br>of title 11, United States<br>under Chapter 7.     | nder Chapter 7, I am aware that I<br>Code. I understand the relief avai                                   | may proceed, if eligible, under<br>lable under each chapter, and | Chapter 7, 11,12, or 13<br>I choose to proceed   |
|      |  |  | this document, I have ob  | me and I did not pay or agree to tained and read the notice require                                       | d by 11 U.S.C. § 342(b).   | •  |
|      |  |  | I understand making a fa  | lefue   | v. or obtaining money or prope                                   | erty by fraud in connection<br>ears, or both.  |
|      |  |  | Executed on   | 4/04/2018   | Executed on _  | MM / DD / YVVV   |

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| Fill in this in                   | nformation to identi                         | fy your case:                                      |                             |  |   |       |
|-----------------------------------|--|--|-----------------------------|--|---|-------|
| Debtor 1                          | Claudia                                      |  | Hinestrosa                  |  |   |       |
|                                   | First Name                                   | Middle Name  | Last Name                   |  |   |       |
| Debtor 2<br>(Spouse, if filing)   | First Name                                   | Middle Name  | Last Name                   |  |   |       |
| United States                     | Bankruptcy Court for t                       | he: <u>NORTHERN</u> District of                    | ILLINOIS                    |  |   |       |
| Case Number                       |  |  | (State)                     |  | _   |       |
| (If known)                        |  |  |                             |  | Check if this is an amended filing                |       |
|                                   |  |  |                             |  | amenued ning                                      |       |
| •                                 |  |  |                             | ·  |   |       |
| Official Fo                       | <u>orm 106 De</u>                            | <u>:C</u>  |                             |  |   |       |
| Declarat                          | ion About                                    | an Individual D                                    | ebtor's Sched               | lules  |   |       |
|                                   | <del></del>                                  |  |                             |  |   | 12/15 |
| f two married p                   | eople are filing toge                        | ether, both are equally respo                      | onsible for supplying corr  | ect information.                                 |   |       |
| ou must file th                   | is form whenever y                           | ou file bankruptcy schedule                        | s or amended schedules.     | Making a false statement, co                     | ncealing property, or                             |       |
| btaining mone<br>ears, or both. 1 | y or property by fra<br> 8 U.S.C. §§ 152, 13 | ud in connection with a ban<br>41, 1519, and 3571. | kruptcy case can result ir  | n fines up to \$250,000, or imp                  | risonment for up to 20                            |       |
|                                   | ,  |  |                             |  |   |       |
| s                                 | lgn Below                                    |  |                             |  |   |       |
| Did you pay                       | or agree to pay son                          | neone who is NOT an attorn                         | ev to bein you fill out ban | kruptov forme?                                   |   |       |
| ■ No                              |  |  | oy to noip you iii out bain | Nuprey Ionns I                                   |   |       |
|                                   | f D  |  |                             |  |   |       |
| ∐ res. Na                         | ame of Person                                |  | •                           | Attach Bankruptcy Pet<br>Signature (Official Fon | ition Preparer's Notice, Declaration, and m 119). |       |
|                                   |  |  |                             |  | •   |       |
|                                   |  |  |                             |  |   |       |
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| linder nenalt                     | v of periupy I deals                         | ro that I have road the assume                     |                             |  |   |       |
| correct.                          | y or perjury, r decia                        | re that I have feat the sumn                       | nary and schedules filed v  | vith this declaration and that                   | they are true and                                 |       |
| <i>\</i>                          | ()   | ,(/  |                             |  |   |       |
| ×                                 | Jun (  | Xeng)  | <b>x</b>                    |  |   |       |
| Signature                         | of Debtor 1                                  | (  | Signature of Debto          | or 2   |   |       |
| Date :                            | 14 /2018                                     |  | Date                        |  |   |       |
| MM                                | / DD / YYYY                                  |  | MM / DD /                   | / YYYY   |   |       |

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Case Number (if known) \_

Hinestrosa

Last Name

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| art 12: Sign Below  |   |   |
| I have read the answers on this Statement of Financial Affairs and answers are true and correct. I understand that making a false stat in connection with a bankruptcy case can result in fines up to \$250 18 U.S.C. §§ 152, 1341, 1519, and 3571. | ement, concealing proper 0,000, or imprisonment for | to or obtaining managers as assured to 5  |
|   | Signature of Debtor 2                               |   |
| Date 4 / 4 /2018  | Date  |   |
| MM / DD / YYYY  | MM / DD / Y   | <del>///</del>  |
| Nidowa W. L. 199  |   |   |
| Did you attach additional pages to Your Statement of Financial Affa   | airs for Individuals Filing i                       | for Bankruptcy (Official Form 107)?   |
| No  |   |   |
| Yes   |   |   |
| lid you pay or agree to pay someone who is not an attorney to help  | you fill out bankruptcy fo                          | prms?   |
| No  | •   |   |
|   | A++   | the Bankruptcy Petition Preparer's Notice,  |
|   | - Allacr  | the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119). |
|   |   | · · · · · · · · · · · · · · · · · · ·   |
|   |   |   |

Debtor 1 Claudia

First Name

Middle Name

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## DISCLAIMER Debtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

  (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors, a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filling fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankruptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our nor-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if Iwa have excess income, or change in state, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OVER PETITION IS ACCURATE!!!!

Dated: // /2018

Claudia Hinestrosa

X Date & Sign

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Claudia Hinestrosa / Debtor

Bankruptcy Docket #:

Judge:

#### VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Dated: 4 / 4 /2018

Claudia Hinestrosa

Claudia Hinestrosa

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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| Part 4: Sign Below  |  |
|---|--|
| By signing here, I declare under penalty of periory that the information on this stater  Claudia Hinestrosa | ment and in any attachments is true and correct. |
| Date: / / /2018   |  |
| If you checked line 17a, do NOT fill out or file Form 122C-2.   |  |
| If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that for                 |  |

Form B 201A, Notice to Consumer Debtor(s)

In re Claudia Hinestrosa / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 4 / / /2018

Claudia Hinestrosa

X Date & Sign

Dated: \_\_\_/\_\_\_/2018

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Record #

Attorney:

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